

CONFIDENTIAL

# Application form



**Printed form:** Please use black ink, and additional sheets if required. **Digital form:** Please save this file and complete using Adobe Reader.

Position applied for

## PERSONAL DETAILS

Title Full name

Address

Telephone Work phone (if you are happy for us to contact you there)

Email

Are you entitled to work in NZ?

If yes:

I am a NZ citizen

I am a permanent resident

I have a current work permit

## YOUR EDUCATION

Give details of the qualifications you hold, along with dates and place of study.

## YOUR EXPERIENCE

Current employer

Current job title

Start date of employment

Name of employer

Address of employer

Please give a brief description of your main duties and responsibilities, particularly where relevant to this role.

**1. Previous employer**

Position held

Dates of employment, from \_\_\_\_\_ to \_\_\_\_\_

Name of employer Address

of employer Reason for

leaving

Key duties and

responsibilities

**2. Previous employer**

Position held

Dates of employment, from \_\_\_\_\_ to \_\_\_\_\_

Name of employer

Address of employer

Reason for leaving

Key duties and

responsibilities

**3. Previous employer**

Position held

Dates of employment, from \_\_\_\_\_ to \_\_\_\_\_

Name of employer

Address of employer

Reason for leaving

Key duties and

responsibilities

Explain briefly why you are applying for this role with TSCF. What excites you about this role and working with TSCF? Please include if you have any prior experience of TSCF

What skills and experience do you have which would help you carry out this role?

What other interests do you have outside work?

Please outline your involvement in church, including which church you currently attend.

This role requires a level of input in Christian ministry in particular an understanding of Christian issues faced by the tertiary sector in New Zealand and supporting the National Director in their role and leadership from a ministry perspective. Are you able to subscribe enthusiastically to each clause of the TSCF Basis of Belief?

## REFEREES

Please give names and addresses of three people who are willing to act as referees for you, and who have known you for the past two years at least. One should be your minister or a church leader and, if possible, one from your present work or study situation. Please indicate the context in which you are known to them. We prefer you not to use current TSCF staff.

1. Name  
Address  
Email & Phone  
Context
  
2. Name  
Address  
Email & Phone  
Context
  
3. Name  
Address  
Email & Phone  
Context

May we contact them without further reference to you?

- 1.
- 2.
- 3.

## DECLARATION

I hereby declare that the information given in this application form is correct to the best of my knowledge. I give permission for the form and references to be copied to those involved in the interviewing and selection process.

Signed

Date

**Please email to [caitlino@tscf.org.nz](mailto:caitlino@tscf.org.nz) or mark your envelope “Confidential” and return it to:**

Caitlin Ormiston, Chief Operating Officer, TSCF, PO Box 9672, Marion Square, Wellington 6141