

School of Education

Te Kura Mātauranga, AUT



VCA FORM C

DISCLOSURE FORM /PERSONAL DECLARATION

THIS FORM **MUST** BE COMPLETED AND SUBMITTED BY **ALL** TEACHER EDUCATION APPLICANTS

Teacher education programmes are different from other academic programmes. They are professional programmes where the welfare and safety of students are paramount. Therefore, these programmes have additional requirements for entry, and graduates of these programmes must meet professional standards set by the Education Council of New Zealand, the registration body.

You are strongly recommended to visit the website of the Education Council of New Zealand to view the Registration Policy (<http://www.educationcouncil.org.nz/registration-policy>). You are particularly directed to the following policy / standards /guidelines in Sections Three and Four:

- Good Character and Fit to be a Teacher Policy (which includes the requirement of having a satisfactory police vet)
- Graduating Teacher Standards,
- Code of Ethics for Registered Teachers

Note that should there be evidence of a conviction, the Education Council of New Zealand may decline your application as a teacher education graduate for provisional registration as a teacher. If you have any concerns or questions please contact the Programme Coordinator of the relevant programme, or the Education Council of New Zealand.

Please complete the following. If you answer "yes" to any question, please provide further information as indicated and place that and this declaration in a sealed envelope marked "confidential". All personal information collected will only be used in accordance with AUT's *Privacy of Information Guidelines*.

Deliberate falsification could result in you not being able to proceed to admission or not being able to continue on the degree.

1. Where were you born: _____

What is/are your first language(s)? _____

Please note that we reserve the right to require you to take an IELTS test if English is an additional language for you and/or we are concerned about your English language proficiency at any stage during your study at AUT.

2. Do you have a medical or physical condition which may affect your ability to perform functions required as a student teacher or as a registered teacher?

This may include chronic back conditions, significant hearing or visual impairment or chronic disease, mental health issues. Please elaborate and include supporting information from a registered medical practitioner (continue of extra sheet if needed).

No

Yes

I understand that it is my responsibility to inform practicum centre/schools I am placed at during study of any medical or physical condition I might have that could affect my ability to perform functions required as a student teacher.

3. Have you been convicted of an offence (including traffic convictions) or do you have a charge pending?

Please disclose and describe offence/s, relevant information, date/s and outcome/s (continue of extra sheet if needed). **Please declare 'clean slate' offences. The Vulnerable Children Act legislation ensures that these offences are also disclosed to us.**

No

Yes

4. Have you been or are you subject to a professional disciplinary investigation?

Please provide details including the name of the professional body, the nature of the investigation, any outcome, and relevant dates (continue of extra sheet if needed).

No

Yes

5. Have you been refused registration, licensing or classification or had your registration, licensing, or classification cancelled?

Please provide details including the name of the professional body, the reason given, the nature of the investigation, any outcome, and relevant dates (continue of extra sheet if needed).

No

Yes

6. Have you ever been dismissed from a teaching position?

Please provide details including the name of the organisation that dismissed you, the reason given, the nature of the investigation and relevant dates (continue of extra sheet if needed).

No

Yes

7. Have you been subject to disciplinary proceedings in a learning institution, centre or school?

Please provide details including the name of the institution, the nature of the proceedings, outcome, and relevant dates (continue of extra sheet if needed).

No

Yes

8. Do you know any reason that anyone would be concerned around you working with Children?

Please provide details including the person or department (e.g. CYF – Child Youth and Family) that may be concerned and a brief explanation of the situation.

No

Yes

9. Please list any countries you have lived in other than New Zealand for 12 months or more in the past 10 years?

Country	Period (mm/yy to mm/yy)

Important note: If you have noted any countries above, then you will need to provide a criminal record check for each country that you have listed (continue of extra sheet if needed).

Statements

Under the headings of Being of Good Character and Fit to be a Teacher, the Education Council of Aotearoa New Zealand requires that ***all student teachers and graduates must meet the following criteria:***

- display respect for persons;
- display respect for cultural and social values of Aotearoa New Zealand;
- display respect for the law and for the views of others;
- uphold the public and professional reputation of teachers;
- promote and nurture the safety of learners within his or her care;
- be reliable and trustworthy in carrying out duties;
- be mentally and physically fit to carry out the teaching role safely and satisfactorily.

By signing below, I signal that I currently meet these criteria, and the following three conditions:

I understand that previous offences may affect consideration of my entry into a teacher education programme. I also recognise that any offence committed during a teacher education programme may prejudice my ability to remain in that programme and graduate.

I agree that if I am charged/convicted of an offence during my period of application/enrolment, or if my mental or physical health circumstances significantly change, that there is a requirement to notify in writing the relevant Programme Coordinator within one week if I am attending classes within AUT OR one day if I am on practicum.

I agree that it is an essential term of my agreement with AUT that the information I have supplied in this personal declaration and any attached information is true and complete, and I acknowledge that AUT may not proceed with or may suspend my enrolment if false information has been supplied, or required information not supplied.

I understand that any criminal convictions reflected on my criminal record check or any other safety audit concerns will be shared with any prospective practicum schools/centres, and they are able to use that information to determine if they would accept me as a student teacher as per the Vulnerable Children Act.

Name: _____ AUT Student ID No: _____

Signature: _____ Date: _____