

Centre Statement of Student Support and Associate Teacher Application Form

(For Blended Learning students only)



Centre manager to complete

Student ID:
(If known)

Student name:

MOE Number:

Centre details

Centre name:

Name of centre owner:

Centre street address:

Centre postal address:
(If different from above)

Centre phone:

Centre email:

Centre opening hours:

Date student starting
at centre: Tick here if this is
a holiday centre:

Declaration

- I accept the Teaching Council of Aotearoa New Zealand requirements that while students may be counted as part of the teacher: child ratio during their home centre field practice placement, **this does not apply** when participating in triadic discussions with the Visiting Lecturer and the Associate Teacher
- I understand the study requirements of the students chosen program and mode of study at New Zealand Tertiary College
- I am prepared to assist the student to complete their study requirements in this centre. I am prepared to enable the student to attend any required classes, field practice and distance learning block courses as outlined in the student's chosen mode of study

Signature of Centre owner: Date:

Associate Teacher to complete

An Associate Teacher is required to have a minimum Diploma of Teaching (ECE) or equivalent qualification, have New Zealand teacher registration and hold a full current practicing certificate. An Associate Teacher is a person in an early childhood centre who provides support and guidance for students during the minimum 16 hours per week (paid or voluntary) in their home centre and during the students home centre field practice. The Associate Teacher is expected to be located at the same location as the student.

Name of Associate Teacher: Email address: Qualification of Associate Teacher: Teaching Council registration number: Teaching Council practising certificate expiry date: Associate Teacher signature: Date: Tick here if you have previously registered with NZTC: **Associate Teacher Declaration**

In signing this document, I:

1. Confirm that the above details are correct and that I have New Zealand teacher registration and hold a full current practicing certificate.
2. I understand the study requirements and am prepared to assist New Zealand Tertiary College students to complete the study requirements.
3. Am prepared to enable students to attend any required classes, field practice and distance learning block courses as for the students mode of study.
4. Accept the New Zealand Tertiary College requirements that while students may be counted as part of the teacher: child ratio during their home centre field practice placement this does not apply when participating in the triadic discussions with the Visiting Lecturer and the Associate Teacher.
5. Am aware that Associate Teachers supporting students on home centre field practice placements will not be remunerated by the College.
6. Agree to support students on out of home field practice placements by:
 - Providing relevant information about the centre to assist the students to complete field practice requirements
 - Assisting students by providing suitable times to meet for advice and guidance
 - Providing verbal and written feedback to students regarding their teaching practice as required
 - Being available for a triadic discussion with the student and New Zealand Tertiary College Lecturer during the field practice centre visit
 - Support students in any follow up requirements to complete their field practice placement
 - Taking part in professional development offered by the New Zealand Tertiary College when possible

Associate Teacher signature: Date:

NZTC thanks you for your support in providing a quality learning environment for our students. Should you have any queries please contact NZTC AT support on 09 520 400 or email at nztertiarycollege.ac.nz.

Wait! Before returning this form, please check that you have:

- Completed all sections of the form Signed and dated this form

Should you have any queries, please phone New Zealand Tertiary College on +64 9 520 4000

If you are an NZTC Applicant then please return via: **Scan and email: enrolments@nztertiarycollege.ac.nz**
Fax: 09 520 4020

If you are an current NZTC student then please return via: **Scan and email: fp@nztertiarycollege.ac.nz**

or post to: **Auckland Campus** - New Zealand Tertiary College, PO Box 17143, Greenlane, Auckland 1546
Christchurch Campus - New Zealand Tertiary College, PO Box 5561, Papanui, Christchurch 8542

New Zealand Tertiary College office use only:

- Centre approval Centre email address
- Associate Teacher registration number verified online (<http://www.educationcouncil.org.nz/search-the-register>)
- Associate Teacher registration number, status and expiry date entered

Name of staff member: Date: