

## GUIDE FOR SCHOLARSHIP RECIPIENTS

### Bonding

# Early Childhood Education Scholarships

### Bonding obligations

You must teach at a licensed ECE centre or as a home-based service coordinator. If you are working in another position requiring an approved ECE qualification, please contact TeachNZ to check whether your position meets the bonding requirements.

You must teach for a minimum of 12.5 hours per week in either a permanent position or a long term relieving position for a minimum of six consecutive weeks.

## Personal and contact details

Please complete this section on the form and note any changes to your personal or contact details.

### Name of ECE service

The Ministry of Education maintains a database of all licensed ECE centres in New Zealand. TeachNZ uses this to process your bonding form. If your centre is licensed, please confirm with your supervisor under what name and number the centre is licensed.

### Employment end date

We will calculate the employment period up to the date the supervisor signs the form or the employment end date (whichever is earliest). For example, if your supervisor signs off the form on 31 January 2014 and states your end date is 5 February 2014, only the teaching completed up to 31 January 2014 will be considered towards your bonding.

If you are leaving the ECE service on a definite fixed date before the next bonding return in six months, please:

- complete and return one form now and
- ask your Supervisor to complete another form on your final day of work.

### Approved leave

TeachNZ calculates your bonding based on your employment dates. Any approved extended leave, including maternity leave, can be counted towards your bonding requirements. You will not need to indicate approved leave separately on the form. For example, if you work at an ECE centre and have taken extended/maternity leave during the period of your employment, enter your original employment start date, and write N/A in the employment end date. If you are not returning to work after your approved leave, enter the employment end date that includes the period you were on approved extended/maternity leave.

## Sending us your form

- Provide updated contact details on the form.
- Ask your supervisor to complete the relevant section.
- Check that all sections in your form have been completed.
- Email:** [teachnz.admin@education.govt.nz](mailto:teachnz.admin@education.govt.nz)

If you have concerns about completing your bonding by the given deadline, please contact us to discuss your options. Failure to complete your bonding obligations may result in you having to repay funds provided by your TeachNZ scholarship.

**Please ensure that all sections of the form are completed, including your most up to date contact details. If the form is returned incomplete, it will not be processed.**

### Guide for Supervisors Completing Form

This employee holds an academic scholarship that requires them to complete a set number of weeks teaching.

Please check the ECE Service Details section of the form, then complete the Supervisor's section of the form.

1. Indicate the Scholarship holder's position by ticking either Teacher or Other. If Other, please specify position.
2. Indicate the hours this employee works in a week. Tick either Full Time, or Part Time. If Part Time, please enter the number of hours worked per week.
3. Complete the Employment Start Date and, if applicable, Employment End Date.
4. Complete and sign the confirmation at the bottom of the form.

TeachNZ is happy to answer any questions about bonding. Call us (free) on 0800 165 225, weekdays between 8:30am and 5pm, or email [teachnz.admin@education.govt.nz](mailto:teachnz.admin@education.govt.nz). Also visit [www.TeachNZ.govt.nz](http://www.TeachNZ.govt.nz).

FORM FOR SCHOLARSHIP RECIPIENTS

Bonding

# Early Childhood Education Scholarships

**Personal and contact details**

State your name as it appears on your birth certificate, marriage certificate or passport.

First name(s):

Surname:

TeachNZ ID #:

If any of your personal or contact details have changed please provide the updates below:

Name:

Address:

Phone:

Mobile:

Email:

Postcode:

## ECE service details

Note: If you have worked for more than one employer, please complete a separate form for each employer.

Name of ECE service:

Ministry of Education ECE service registration number (if known):

ECE service phone number:

ECE service email address:

ECE service address:

Postcode:

## Supervisor to complete

Scholarship holder's position (please tick one):

Teacher

Other (please specify):

Teaching role (please tick one):

Full Time

Part Time (at least 12.5 hrs/week):

 hours

Employment Start Date:

Employment End Date (N/A if continuing):

I confirm that all information on this form is correct.

Name of Supervisor verifying employment:

Supervisor's job title:

Supervisor's signature

Date: