



INSTITUTE OF REGISTERED MUSIC TEACHERS OF NEW ZEALAND

APPLICATION for REGISTRATION - from 2012

NB Please ensure that the form used has the year of application on it.

A PERSONAL INFORMATION PLEASE PRINT ALL INFORMATION

1. Given Names (underline most commonly used name)

Family Name (if using a name other than your legal name, please add this in brackets)

(Please precede this with MR / MRS / MISS / MS / DR or other designation)

2. State complete preferred name for Membership Listing (one forename or initials)

3. Address (maximum of three lines)

(No. & Street/PO Box) _____

(District/Suburb) _____

(City/Town) _____ Post Code _____

4. To include in listing: Tel (0) _____

Email _____ @ _____

Website _____

5. For IRMT use only: Mobile (0) _____

Fax No (0) _____ Private Tel (0) _____

6. Date of birth _____ [min. age for Registration is 20, for Provisional 18]

7. NZ/Australian Citizen (tick one)

Residency Visa Length of residence in NZ ___ years

B CATEGORIES

I wish to be registered in the following: *(Please refer to the Application Guide Appendix 1)*

- 1. Practical
 - i _____
 - ii _____
 - iii _____
 - iv _____
- 2. Theory
 - i _____
 - ii _____

C MUSIC/TEACHING QUALIFICATIONS and MUSICAL EXPERIENCE

	Title of Certificate (& Abbreviation)	Year	Examining body
i	_____	_____	_____
ii	_____	_____	_____
iii	_____	_____	_____
iv	_____	_____	_____

(Please use a separate sheet for other qualifications and musical experience)

NON- MUSICAL QUALIFICATIONS

	Title of Certificate (& Abbreviation) - Subject	Year	Examining body
v	_____	_____	_____
vi	_____	_____	_____
vii	_____	_____	_____

NB Please supply witnessed photocopies of all qualifications (see F2 below)

D TEACHING EXPERIENCE

1. How many years have you been teaching in each category in which you are seeking registration?

	Category	Number of years experience	Dates
i	_____	_____	_____
ii	_____	_____	_____
iii	_____	_____	_____
iv	_____	_____	_____

- 2. List the numbers of pupils you have taught during each of the last five years in each category for which you are seeking registration. This question refers to individual pupils, not classes or groups.

	Category	current year	previous years			
i	_____	_____	_____	_____	_____	_____
ii	_____	_____	_____	_____	_____	_____
iii	_____	_____	_____	_____	_____	_____
iv	_____	_____	_____	_____	_____	_____

- 3. Briefly describe any group or class teaching you have done.

- 4. Currently, approximately how many hours per week on average do you teach private pupils?

_____ hours

- 5. What is the highest level of proficiency you have taught, in the last five years?

Practical _____

Theory _____

- 6. List some recent performance achievements by your pupils.

NB Please supply documentary evidence of pupils' achievements

- 7. List some recent theory results from your pupils.

- 8. Include any further information which would help the Registration Board make a fair assessment of your teaching competence.

E LESSON OBSERVATIONS & REFEREES' STATEMENTS

(Please refer to the Application Guide.)

- Lesson Observations and **THREE REFEREES' STATEMENTS** are required.
- Persons related to the applicant are ineligible to act as referees.
- *Please arrange to have two lessons observed.
Your 1st Referee (an **IRMT Associate or Fellow**) must have observed you giving two lessons within one year of the date of the application.

Note: if you are receiving lessons from a member of the IRMT at the time of application, then this teacher must be one of the referees supplying a Referee's Statement. However, this person is ineligible to be the referee undertaking the Lesson Observation.

* Applications for Theoretical Subjects do not require Lesson Observations but the applicant must supply documentary evidence of teaching undertaken in lieu.

Name of person observing _____
PLEASE PRINT

IRMT Membership No. _____

Address: _____

Tel: _____ Email _____@_____

Name of 2nd referee _____

IRMT Membership No (if appropriate) _____

Address: _____

Tel: _____ Email _____@_____

Name of 3rd referee _____

IRMT Membership No (if appropriate) _____

Address: _____

Tel: _____ Email _____@_____

F DECLARATIONS

Have you ever been convicted of an offence against the law? **Yes / No** (*circle one*)
 If the answer is 'Yes' you are asked to provide details in confidence.

1. Applicant's Declaration

I do solemnly and sincerely declare that to the best of my knowledge and belief, all the information given above is entirely true and correct.
 Upon registration I agree to be bound by the terms of the Music Teachers' Act 1981, by the Rules of the Institute, and by the Code of Ethics as prescribed by the Council of the Institute.

Signed _____ **Date** _____

Name (PLEASE PRINT) _____

2. Witness's Declaration (The witness must be one of the above referees and an IRMT Associate or Fellow)

My signature on the photocopies of qualifications enclosed verifies that I have sighted the originals.

Signed _____ **Date** _____

Name (PLEASE PRINT) _____

G POLICE CHECK

In line with current practice in the teaching profession, IRMTNZ requires new applications to agree to a search of Ministry of Justice records for any convictions. An applicant must provide a copy of Ministry of Justice form **Priv/F2** giving authority for such information to be provided to the IRMTNZ's Registrar. These details will remain strictly confidential.
 (*Please refer to the Application Guide*)

H CLOSING DATES: 15 May 15 November

Closing dates will be strictly adhered to.

Applicants are advised to keep a copy of their application

APPLICATION FEE \$65.22
GST \$ 9.78
TOTAL **\$75.00**

IRMT GST No. 21 - 071 - 161

This application fee will remain at this rate until January 2013.

Send Application Form and attachments to:
 The Registrar
 P O Box 4122
 Christchurch 8140
 Fax: (03) 384 4639

Paying electronically (preferred method):

National Bank
 Account Name: IRMTNZ
 Account No: 060501-0462799-00
 Code: *your name*
 Reference: "IRMT App"

Note: Please ensure you include your name so that we know who has sent us the payment

Paying by cheque:

Please make cheques payable to IRMT of New Zealand