



## Professional Leader Endorsement Form

- Step 1.** Applicant complete Section A.
- Step 2:** Endorser (your employer e.g. Board of Trustees Chairperson or direct employer) to complete Section B and return to applicant.
- Step 3.** Applicant log into [Hapori Matatū](#) and upload this completed form to *Endorser Approval section*.

### Section A: Applicant details Applicant to complete.

#### 1. Applicant Details

Surname:

First and middle names:

#### 2. Registration Details

Registration number:

### Section B: Endorsement Endorser to complete and return the form to the applicant.

#### 3. Statement of endorsement - complete the endorsement checkboxes below (tick).

I affirm that ..... (full name)

Meets the following criteria:

Yes	No	The teacher has completed satisfactory professional development.
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Yes	No	The teacher has continued to develop and practise te reo me ngā tikanga Māori while practising as a teacher.
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AND

Yes	No	I have had appropriate professional conversations with the teacher, the mentor and other relevant people involved in the teacher’s development.
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▶ If you answered no to any of the above, please attach evidence and/or commentary.

Select **one** of the following options:

a. The teacher has been endorsed as **meeting** the Standards for the Teaching Profession.

b. The teacher has been endorsed as **likely to meet** the Standards for the Teaching Profession.

c. The teacher has been endorsed as **not meeting** the Standards for the Teaching Profession.

See the *Standards for the Teaching Profession | Ngā Paerewa mō te Umanga Whakaakoranga* on the [Teaching Council website](#).

▶ If you selected option c above, attach evidence and/or commentary.



**4. Endorser details** – employer e.g. Board of Trustees Chairperson or direct employer to complete this section.

**Full name:**

**Learning institute:**

**Registration number:**  
(if applicable)

**Position/Role:**

**Email address::**

**Signature:**  
(print and sign)

**Date signed:**

**5. Second endorser details** – to be completed if there is a perceived conflict of interest between the applicant and first endorser.

**Full name:**

**Learning institute:**

**Registration number:**  
(if applicable)

**Position/Role:**

**Email address::**

**Signature:**  
(print and sign)

**Date signed:**

