

# Application for Employment (Teaching Staff)

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Please complete this form and attach it to your application by the advertised positions closing date.

Also to be included in your application is:

- A letter of application addressing the criteria and job description
- A philosophy of 21<sup>st</sup> century Learning Statement

1.	POSITION					
	Position appl	ying for				
2.	PERSONAL	DETAILS				
	Family Name	)				
	Given Name	's				
	Title (Mr/Mrs/	/Ms/Miss/Dr)				
	Date of Birth		Sex			
	Home Addres	SS				
	Postal Addre	SS				
	Mobile Phone	9	Home Phone			
	Email					
	Country of C	tizenship				
	Australian Re	esidency				
	Religion					
	•					
3.	EMPLOYMENT REFEREES (one of whom must be your current employer)					
	Referee 1:	Full Name				
		Position/Organisation				
		•				
	Referee 2:	Full Name				
		Position/Organisation				
		Phone Number				
	Referee 3:	Full Namo				
	Kelelee 3.					
		Position/Organisation				

### 4. EDUCATION

### **Secondary Education**

Highest Award	
School Attended	
Year of Award	
Tertiary Education	
Name and Location of Institution	
Award Conferred	
Years of Attendance	Date Conferred
Name and Location of Institution	
Award Conferred	
Years of Attendance	Date Conferred
Name and Location of Institution	
Award Conferred	
Years of Attendance	Date Conferred
Teaching Qualifications	
reacting additional	
I am qualified to teach	
Teaching subject areas	
<b>,</b>	
Significant, Recent and Relevant Professional Devel	lopment (within the last 5 years)
Name and Location of Institution	
Award Conferred (if applicable)	
Years of Attendance	Date Conferred
Name and Location of Institution	
Award Conferred (if applicable)	
Years of Attendance	Date Conferred
Name and Location of Institution	
Award Conferred (if applicable)	
Years of Attendance	Date Conferred
Name and Location of Institution	
Award Conferred (if applicable)	
Years of Attendance	Date Conferred

#### 5. EMPLOYMENT HISTORY

Current Teacher Classification (e.g ST1, 4YT-STEP 6)
Independent Schools Teacher Accreditation Authority (ISTAA) Status (as applicable)
Year in which Status Conferred (as applicable)
Present Employment
Name of School/College/Employer
Address of Employer
Name of Principal/Employer
Current Employment Start Date
Current Position
Other Positions held with present Employer
Current Salary
Past Employment (in reverse order from most recent employer)
N.B. Where part-time teaching is listed, please indicate your FTE load.
Name and Address of Employment
Positions Held/Classes Taught
Date (from - to)
Date (Hoth - to)
Name and Address of Employment
Positions Held/Classes Taught
Date (from - to)
Name and Address of Employment
Positions Held/Classes Taught
Date (from - to)
Name and Address of Employment
Positions Held/Classes Taught
Date (from - to)
Name and Address of Employment
Positions Held/Classes Taught
Date (from - to)
Name and Address of Employment
Positions Held/Classes Taught
Date (from - to)

#### 6. TEACHER ACCREDITATION (under the Institute of Teachers Act 2004)

7.

New scheme teachers (including newly graduated teachers, interstate and overseas teachers) intending to teach for the first time in NSW from 1 October 2004 must meet the requirements of the NSW Institute of Teachers. In addition, qualified teachers returning to teaching in NSW after an absence of five years or more (also deemed new scheme teachers) must meet the requirements of the NSW Institute of Teachers. Further information is available from the Institute of Teachers' website <a href="https://www.nswteachers.nsw.edu.au">www.nswteachers.nsw.edu.au</a>

Are you accredited with the Institute of Teachers		Yes		No
If yes, please provide your accreditation number				
If yes, please provide your accreditation level				
If yes, please identify the Teacher Accreditation Authority				
I was qualified and teaching (NSW Board of Studies subjects) in NSW at some	time d	uring the	e five y	ears
before 1 October 2004		Yes		No
My application is now with the Institute of Teachers		Yes		No
I am unaware of the Institute of Teachers and its requirements		Yes		No
I will be joining the Institute of Teachers with the application		Yes		No
EMPLOYMENT SCREENING				
New regulations regarding the <i>Working with Children Check</i> came into use in A prospective employees must now acquire a <i>Working with Children Check Clea</i> being employed in child related work. Please refer to the NSW Government Of Commission for Children website for further information <a href="http://kids.nsw.gov.au/kids/working/newcheck/gettinganewcheck.cfm">http://kids.nsw.gov.au/kids/working/newcheck/gettinganewcheck.cfm</a>	rance N	Number	prior to	
Working with Children Clearance Number				
Please attach the relevant documentation to your application.				
Have you ever had your registration, licensing or classification as a teacher or	any oth	er entitl	ement	to
teach cancelled or suspended or withdrawn in Australia or any other country?		Yes		No
Have you ever been refused registration, accreditation, licensing or classification	on as a	teache	r in	
Australia or any other country?		Yes		No
Have you ever been dismissed or asked to resign as a teacher in Australia or a	iny othe	er count	ry?	
		Yes		No
Have you ever (or are you currently) the subject of disciplinary proceedings (or	any ac	tion tha	t might	lead
to such proceedings) in relation to your employment in Australia or any other co	ountry?	1		
		Yes		No
Have you ever been convicted of an offence carrying a penalty and imprisonme	∍nt?□	Yes		No
If you have answered YES to any of the above questions, please attach details.				

## 8. DECLARATION

9.

Do you have any illness/injury/health problem that may render you unable to carry out the inherent					
requirements of the position?					
Do you have a Workers' Compensation illness/injury that may render you unable to carry out the					
inherent requirements of the position?					
If you have answered YES to either of the above questions, please attach details.					
I certify that the information provided by me in this application form is complete and correct in every detail, and I understand that deliberate inaccuracies or omissions may result in non-acceptance of this application and/or the termination of any employment that may be offered.					
Signature Date					
ATTACHMENTS					
Listed below are documents relevant to your application. Please submit copies that have been verified as true copies of the original by either a Justice of the Peace or a Solicitor.  Please note that copies are required of all applicable documents (please tick where attached).					
Theade field that depice are required of an applicable desamente (piedes tion where attached).					
□ '100 point' proof of identity (e.g. passport, birth certificate and driver's license / Medicare card)					
□ Proof of citizenship / Australian residency (e.g. birth certificate, passport, visa)					
☐ University or College final transcript of academic results including eligibility for Award					
Teaching Qualifications					
Other Degrees, Diplomas or Certificates including First-Aid Certificates (if applicable)					
☐ Statement(s) of Service showing					
a) Commencement Date					
b) Termination Date					
c) Whether service was full-time or part-time or casual					
d) For part-time or casual service, details of hours/days worked					
□ Evidence of teacher classification					
☐ Evidence of ISTAA accreditation (if applicable)					
□ Working with Children Check Clearance Number					
☐ Details of any relevant employment screening matters					
□ Details of any relevant illness/injury					
Details of any relevant Workers Compensation illness/injury					

Documents of unsuccessful applicants will be securely destroyed six months after the position is filled.