



Stella Maris

COLLEGE MANLY

# Application for Employment (Non-Teaching Staff)

a 52 Eurobin Avenue, Manly NSW 2095 t +61 2 9977 5144 f +61 2 9976 2753 cricos 03290E  
e administration@stellamaris.nsw.edu.au w www.stellamaris.nsw.edu.au abn 88 058 323 827

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

Please check that your application for the advertised position includes:

- A cover letter that addresses the selection criteria
- Details of your qualifications and experience
- Details of your current 'Working With Children' Clearance that is required to be considered for the advertised position

## 1. POSITION

Position applying for .....

Where did you first hear about this job?

- |   |   |   |
|---|---|---|
| <input type="checkbox"/> seek.com.au                  | <input type="checkbox"/> teachers.on.net            | <input type="checkbox"/> au.education.hq              |
| <input type="checkbox"/> The Sydney Morning Herald    | <input type="checkbox"/> The Manly Daily            | <input type="checkbox"/> Other (please specify below) |
| <input type="checkbox"/> Stella Maris College website | <input type="checkbox"/> Stella Maris College staff | .....   |

## 2. PERSONAL DETAILS

Family name .....

Given name/s .....

Title (Mr/Mrs/Ms/Miss/Dr) .....

Date of birth ..... Gender .....

Home address .....

Postal address .....

Mobile phone ..... Home phone .....

Email .....

Country of citizenship .....

Australian residency  Yes  No

Religion .....

Parish attended .....

## 3. EMPLOYMENT REFEREES

Referee 1: Full name .....

Position .....

Organisation .....

Phone number .....

Referee 2: Full name .....  
Position .....  
Organisation .....  
Phone number .....

Referee 3: Full name .....  
Position .....  
Organisation .....  
Phone number .....

#### 4. EMPLOYMENT SCREENING

New regulations regarding the *Working with Children Check* came into use in April 2013. As such, all prospective employees must now acquire a *Working with Children Check Clearance Number* prior to being employed in child related work. Please refer to the [NSW Government Office of Communities Commission for Children](#) website for further information.

Working with Children Clearance Number .....

Have you ever been convicted of an offence carrying a penalty and imprisonment?  Yes  No

*If you have answered YES to the above question, please attach details.*

#### 5. DECLARATION

Do you have any illness/injury/health problem that may render you unable to carry out the inherent requirements of the position?  Yes  No

Do you have a Workers' Compensation illness/injury that may render you unable to carry out the inherent requirements of the position?  Yes  No

*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 .....