



Personal Details *(Please ensure your full name and DOB are included)*

Surname/Family Name _____ Given Name(s) _____
Preferred Name _____ Date of Birth _____
Residential Address _____
Suburb _____ Post Code _____
Email _____ Mobile _____

Teaching Qualifications and Experience

Specialty Teaching Subjects/Learning Areas

Availability

I am available on:	Monday	Tuesday	Wednesday	Thursday	Friday		
Are you available for night before calls?						Yes	No
Are you available for on the day calls?						Yes	No
Preferred year levels:	Reception - Year 6		Years 7 - 9		Years 10 - 12		

Current Certifications *(As Applicable)*

Responding to Risk of Harm, Abuse and Neglect (RRHAN)	Expiry Date: _____
First Aid or Senior First Aid	Expiry Date: _____
DHS Working with Children Check	Expiry Date: _____
Teacher's Registration	Registration No: _____ Expiry Date: _____

Referees

Name _____	Position Title _____
Organisation _____	Contact Number _____
Name _____	Position Title _____
Organisation _____	Contact Number _____



Declaration - Confidential

Please respond to the questions below and sign the Declaration at the end of this form:

- | | | |
|---|-----|--------|
| 1. Have you ever been investigated, charged or arrested, reported for or pleaded or found guilty of any criminal offence? (tick "No" where an expiation notice was only received) | Yes | No |
| 2. Have you ever received a written counselling or warning or been dismissed or resigned following allegations of improper or unprofessional conduct or unsatisfactory work performance? | Yes | No |
| 3. Have you ever or are you currently the subject of an investigation or any other process relating to alleged unsatisfactory performance or misconduct by you as an employee? | Yes | No |
| 4. Have you ever been the subject of allegations of misconduct by you of a sexual nature towards or in relation to a child (person under 18 years of age) or towards any other person to whom you were responsible for providing education or other services? | Yes | No |
| 5. Our process includes asking referees whether there are any child protection concerns in your regard. Do you foresee any problem arising from this process? | Yes | No |
| 6. (If applicable) Do you have conditions on your SA teacher registration? | N/A | Yes No |

Please note: If you answer YES to any of the above questions, you are required to provide comprehensive supporting details, including relevant documentation in order to be considered for employment. (Please attach as separate sheets)

If you choose not to answer one or more of the above questions, please indicate by ticking the box below that you wish to meet with the Principal/Director (or delegate) to discuss.

I have opted not to answer one or more of the above questions and ask that a meeting be arranged between the Principal /Director (or their delegates) and me.

Please note: If you wish a meeting to be arranged you must submit your application at least one week prior to the closing date.

Further Information and ongoing requirements

Evidence of a criminal history that may be unrelated to any risk of harm to children will not automatically preclude a person from being or remaining employed. The requirement for full and honest disclosure is a condition of initial and ongoing engagement. In signing this form you declare that you are a fit and proper person of good character, and if you are successful in your application, you will notify the Principal / Director should there be a relevant change in your circumstances; for example, criminal charges and convictions, restraining orders, intervention orders, injunctions, disciplinary proceedings and investigations.

If you are charged with, convicted of, or granted bail in relation to a sexual offence against a child you are required to inform the Principal / Director immediately and if you are accused, convicted or granted bail you will need to immediately cease providing services to CESA.

Declaration

I understand that any false or misleading information I provide will result in me not being considered for employment or may result in the termination of my employment. I declare that I have answered this Employment Declaration Form truthfully.

Signed _____ Date _____

Please submit this application form, and all current certifications listed above, to reliefs@rostrevor.sa.edu.au