

WILLIAM CLARKE EDUCATING TO MAKE A DIFFERENCE

FILLING IN THIS FORM

Acrobat Reader:

Fill out the form using Acrobat Reader (not your web browser) to ensure all content is saved correctly. If you don't have Acrobat Reader download here: get.adobe.com/reader/

Manually:

- Please use black or blue pen.
- Print in BLOCK LETTERS.

POSITION APPLIED FOR

How did you hear about this position?

PERSONAL INFORMATION

Title

 Mr Mrs Miss Ms Dr

First name/s

Family name

Street address

Suburb

State

Postcode

Postal address (if different from above)

Suburb

State

Postcode

CONTACT INFORMATION

Home phone

Business phone

Mobile

Fax

Email

EMERGENCY CONTACT

First name/s

Family name

Phone number

HEALTH

Do you have any medical conditions which may affect your capacity or suitability to perform the duties of the position for which you have applied?

Yes No

If yes, please provide details below

EDUCATION INFORMATION

SECONDARY

School	Level attained	Years of attendance

TERTIARY

Name and location of Institute	Degree, Diploma or Certificate Conferred	Years of attendance

Do you hold a current First Aid Certificate?

Yes No

PROFESSIONAL ASSOCIATIONS

List any professional associations of which you are a member.

CO-CURRICULAR ACTIVITIES

All teaching staff at William Clarke College are expected to be involved in the co-curricular life of the College, for example, coaching a sport team, managing a sport code, coaching debating or a music group, or involvement with Christian youth groups to name a few. Please specify any particular expertise or interest you may have in the area of co-curriculum.

PAST EMPLOYMENT INFORMATION

Indicate in order previous positions held, commencing with the most recent position.

POSITION 1

From (MM/YY)	To (MM/YY)	Name & location of employer	Position held
Full-time / Part-time	Reason for leaving		

POSITION 2

From (MM/YY)	To (MM/YY)	Name & location of employer	Position held
Full-time / Part-time	Reason for leaving		

POSITION 3

From (MM/YY)	To (MM/YY)	Name & location of employer	Position held
Full-time / Part-time	Reason for leaving		

Please indicate any positions of special responsibility you have held or other experience relevant to this application.

SALARY CLASSIFICATIONS AND ACCREDITATION (TEACHING STAFF ONLY)

Salary Step/Band under your current Teachers' Agreement	
Name of this Agreement	
NESA Accreditation Number	
NESA Accreditation Level	
Date Attained	

CHURCH ATTENDANCE AND PHILOSOPHY OF CHRISTIAN EDUCATION

Please briefly share your faith journey (please use the last page if additional space is required)

(Teaching staff only) Please share your philosophy of education (particularly in the context of an evangelical Christian school)

Church attending

Denomination

Attendance

Weekly

Once a month

Occasionally

RELIGIOUS REFEREE

Name

Relationship to Candidate

Phone

<input type="text"/>	<input type="text"/>	<input type="text"/>
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OTHER INFORMATION – PROFESSIONAL/CHARACTER REFEREES

Please provide the name and contact details of three persons to whom reference may be made in regard to professional competency and character. One of these persons must be a recent employer.

Please note, referees may be contacted at any stage in the recruitment process. Therefore, you should ensure that you have advised them that they may be contacted to discuss your application.

REFEREE 1

Name

Phone

<input type="text"/>	<input type="text"/>
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Employer

Position

<input type="text"/>	<input type="text"/>
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REFEREE 2

Name

Phone

<input type="text"/>	<input type="text"/>
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Employer

Position

<input type="text"/>	<input type="text"/>
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REFEREE 3

Name

Phone

<input type="text"/>	<input type="text"/>
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Employer

Position

<input type="text"/>	<input type="text"/>
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WORKING WITH CHILDREN CHECK

If successful in your application for employment, you will need to provide your Working with Children Check number for verification prior to commencement. This enables the College to fulfil its responsibilities under the Commission for Children and Young People Act 1998 (NSW) (as amended or replaced from time to time), and any other applicable legislation dealing with child protection.

PROOF OF AUSTRALIAN CITIZENSHIP OR WORKING VISA

Please provide proof of Australian Citizenship or approval to be actively employed in Australia (e.g. photocopy of Australian Birth Certificate or Working Visa). The copy you provide must be certified by a Justice of the Peace as being a true copy.

PRODUCTION OF EVIDENCE OF QUALIFICATIONS

Please attach copies of evidence of academic qualifications (where applicable). e.g. copies of certificates or academic transcript. If successful in your application for employment, original certified documentation will be required prior to commencement.

DECLARATION

In returning this form, I certify that the information on this 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 termination of employment.

Name *(please type full name)*

Date

<input type="text"/>	<input type="text"/>
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Please return via email the completed Application Form together with a covering letter, CV and scanned copies of required documents to employment@wcc.nsw.edu.au

Please include any additional information in support of your application

Empty text area for providing additional information.