



TAIPA AREA SCHOOL

APPLICATION FORM

Position Applied for

Vacancy/Ref Number

PRIVACY OF PERSONAL INFORMATION

The information you provide on this application form will be collected and held by the Board of Trustees of Taipa Area School. It is being collected for the sole purpose of assessing your suitability for employment in the position applied for.

If your application is successful, this form will be retained on your personal file. If unsuccessful it, along with your other application papers, will be confidentially destroyed. If you wish for your application papers to be returned, please supply a stamped self-addressed envelope. You have the right of access to personal information and to seek any correction you think necessary to ensure accuracy.

1 PERSONAL DETAILS

Family Name:

First Name:

Address:

Phone:

Home

Mobile

Business

Ext.

Email:

Current Teacher
Classification

e.g. : Full Registration

Registration Number:

Expiry Date:

2 TERTIARY EDUCATION COMPLETED (please attach copies of official transcripts)

Degree, Diploma or Certificate	Name and Location of Institution	Years of Attendance

3 TERTIARY STUDY CURRENTLY BEING UNDERTAKEN

Degree, Diploma or Certificate	Name and Location of Institution	Years of Attendance

8 COMMUNITY INVOLVEMENT

9 CONVICTIONS AGAINST THE LAW

Have you ever been convicted of any offence against the law (apart from minor traffic convictions)?	YES	NO
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If 'YES' enclose a certified copy of the entry in the Criminal Record Book relating to the conviction(s), obtained from the Registrar of the Court concerned. The copy should be accompanied by any comments regarding the offence which you wish to make. Give full details:

Note: the Board of Trustees may seek a police clearance from all short-listed applicants or preferred applicants prior to confirmation of appointment.

10 REFEREES

Please give details of your referees.

a)	Name:		Phone:	
	Position Held:			
	Address			
b)	Name:		Phone:	
	Position Held:			
	Address			
c)	Name:		Phone:	
	Position Held:			
	Address			

Authority to approach other referees

I authorise the Board, or nominated representative, to approach persons or the Teachers Council, other than the referees whose names I have supplied, to gather information related to my suitability for the appointment to the position	YES	NO
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I authorise the Board, or nominated representative, permission to access any information held by the Teachers Council, including matters under investigation, to gather information related to my suitability for the appointment to the position	YES	NO
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11 DOCUMENTATION, PROOF OF IDENTITY

Please list the documents that you have attached to this application form. Enclose ONLY COPIES of original documents. Please provide two types of proof of identity (one photo ID, e.g. passport, driver's licence and one record ID, birth certificate, bank statement

12 DECLARATION

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

Signature:

Date:

13 AUTHORISATION

Do you agree to inquiries being made as to the accuracy of information contained in this application form or associated documents, or any other matter relating to your suitability for employment?

Please indicate as appropriate:	Yes	No
Present Employer		
Past Employer		
Other Referees		
Former Principal		

Signature:

Date: