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| --- | --- | --- | --- |
| **School Name** |  | **Position Title** |  |
|  |
| 1. **Personal Details (Please use BLOCK LETTERS)**
 |
| Family Name: |  | Given Name(s): |  |
| Gender: |  Male  Female | Date of Birth: |  / /  |
| If your name has changed, indicate your original family name: |  |
| Are you an Australian Citizen?  Yes  No If **NO**, please provide evidence of permanent residence status or work permit. |
| **Address & Contact Information**Number/Street: Suburb/Town: State: Postcode: Preferred Telephone No: Alternative No: Email Address  |
| **Optional Information** |
| Country of Birth:  | What is your Ancestry?  |
| Are you of Aboriginal or Torres Strait Islander Origin?  No  Yes, Aboriginal  Yes, Torres Strait Islander |
| What is your language/linguistic background? |  |
| Please indicate your proficiency to Read, Write or Speak this languageREAD:  High  Med  LowWRITE:  High  Med  LowSPEAK:  High  Med  Low | Do you have an Impairment? No  Yes Provide Details    |
| 1. **Previous Employment with the Department**
 |
| Have you been previously employed by this Department?  No  YesIf **YES** state your previous Employee ID / PIN / Record Number: (Previous Employee ID / PIN / Record Number is required to ensure all previous entitlements and service is carried forward to this period of employment) |
| 1. **Previous relevant experience in Ongoing, Fixed Term or Casual Relief Teacher positions**
 |
| Experience with this Department**School Dates** \_\_\_/\_\_\_/\_\_\_ to \_\_\_/\_\_\_/\_\_\_ \_\_\_/\_\_\_/\_\_\_ to \_\_\_/\_\_\_/\_\_\_ \_\_\_/\_\_\_/\_\_\_ to \_\_\_/\_\_\_/\_\_\_ \_\_\_/\_\_\_/\_\_\_ to \_\_\_/\_\_\_/\_\_\_ \_\_\_/\_\_\_/\_\_\_ to \_\_\_/\_\_\_/\_\_\_ \_\_\_/\_\_\_/\_\_\_ to \_\_\_/\_\_\_/\_\_\_ | Experience with other Organisations (attach documentary evidence)**Employer Dates** \_\_\_/\_\_\_/\_\_\_ to \_\_\_/\_\_\_/\_\_\_ \_\_\_/\_\_\_/\_\_\_ to \_\_\_/\_\_\_/\_\_\_ \_\_\_/\_\_\_/\_\_\_ to \_\_\_/\_\_\_/\_\_\_ \_\_\_/\_\_\_/\_\_\_ to \_\_\_/\_\_\_/\_\_\_ \_\_\_/\_\_\_/\_\_\_ to \_\_\_/\_\_\_/\_\_\_ \_\_\_/\_\_\_/\_\_\_ to \_\_\_/\_\_\_/\_\_\_ |
| Casual Relief Teaching in a Victorian Government School (after 1/1/2005). Attach Statements of Service as evidence of CRT employment which includes the dates employed and number of hours worked each day. |
| 1. **Qualifications for this position (Attach evidence as indicated on instruction sheet)**
 |
|  Name of Course Name of Institution Completion Date Course LengthFirst Qualification YearsSecond Qualification YearsThird Qualification YearsFourth Qualification YearsDo you hold accreditation from the Department to teach a Language Other than English in Victorian Primary Schools?  No  YesIf **YES** state Language:  |
| 1. **Victorian Institute of Teaching Registration**
 |
| Do you hold current registration or permission to teach with the Victorian Institute of Teaching?  No  YesIf **YES** provide your VIT Registration Number:  |
| 1. **Subjects offered for Teaching (Teacher positions only)**
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| Subjects you offer to teach – Indicate levels. For example: Music P-6, Mathematics 12 |
| 1.  | 2.  | 3.  | 4.  |
| 5.  | 6.  | 7.  | 8.  |
| 1. **Additional Information**
 |
| If you answer **YES** to any of these questions, provide relevant details including dates on an attached sheet |
| 1. Do you have a current Working with Children Check? If YES, provide details  Yes  No
2. Have you undergone a National Police Check? If YES , please provide details ………………………………………………………………………………….  Yes  No
3. Have any of your periods of service with any employer (including this Department) ceased due to Ill Health of any kind?  Yes  No
4. Were you ever the subject of disciplinary action?  Yes  No
5. Have you received any form of Voluntary Departure Package (VDP)?  Yes  No

Date of last employment where cessation was as a result of accepting a VDP \_\_\_/\_\_\_/\_\_\_\_ |
| 1. **Declaration**
 |
| I declare that the information I have provided is true and correct.Signature of employee Date \_\_\_/\_\_\_/\_\_\_\_\_ |