

Employment Application – School Officer

Vacancy Details

Position Title: _____ Date of Application: ___ / ___ / _____

Applicant Details

Title: _____ First Name: _____ Surname: _____

Male Female

Home Address: _____

Postal Address: _____

Phone 1: _____ Phone 2: _____

Email: _____ Date able to commence work: ___ / ___ / _____

Do you hold a current Australian driver's licence? Yes No

Are you an Australian citizen? Yes No

If you are not an Australian citizen, please provide further details.

Are you eligible to work in Australia? Yes No

Type of Visa: _____

Visa Number: _____ Expiry: ___ / ___ / _____

Criminal History and Working with Children Checks

It is a requirement that the successful applicant have Criminal History and Working with Children Checks.

Do you hold a current Working With Children/Ochre Card? Yes No

Attachments

Please attach the following documents:

- Statement of Service
 - Statement of Service must:*
 - *Be on letterhead;*
 - *State dates of service;*
 - *State whether service was full-time, part-time, permanent, contract, or casual (For any service other than full-time, total hours worked must be stated);*
 - *State any periods of leave without pay; and,*
 - *Be provided within six months of commencement of appointment to qualify for back-payment. If not provided, payment will be made at lowest level.*
- Current résumé
- Certified copies of all relevant qualifications and academic transcripts
- Any written reference you may have
- Certified copy of current Ochre Card
- Certified copy of photo identification (e.g. drivers licence, passport)
- Certified copy of proof of name change, if applicable, such as a Marriage Certificate or Decree Nisi
- For non-residents, a certified copy of your passport and current visa

Medical Information

Do you have any health problems or a medical condition that may affect your ability to perform the requirements of the position as specified in the position description? Yes No

If yes, please provide details: _____

If required, would you agree to undergo a medical examination to assess your suitability to be able to carry out the requirements of the position? Yes No

Referees

Please list three referees whom we can contact regarding your suitability for the position

Referee 1

Name: _____ Organisation: _____

Position: _____ Contact Details: _____

Referee 2

Name: _____ Organisation: _____

Position: _____ Contact Details: _____

Referee 3

Name: _____ Organisation: _____

Position: _____ Contact Details: _____

Declaration

I certify that the information in this application is true, to the best of my knowledge. I understand that I have a duty to disclose sufficient information to enable a prospective employer to make a properly informed decision about my employment.

Any appointment to a school officer position with MacKillop Catholic College is subject to the appointee demonstrating appropriate qualifications, certificates and documentation, as detailed above.

I understand that this position has a six month probation period, and in accepting this position I am also accepting a probationary review after six months.

I understand that my records will be kept on file for a twelve month period only pending your employment within the College.

Applicant Signature: _____ Date: ___ / ___ / _____

Please return application along with attachments to:

The Principal
MacKillop Catholic College
P.O. Box 2608
Palmerston NT 0830

Thank you for your application