



**St Joseph's School**

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Korumburra 3950

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## **Application for Employment – Administration Officer**

*St Joseph's is committed to child safety and is legally required to obtain the following information about a person whom it proposes to engage to perform child-connected work:*

- a) Employee Working with Children Check status, or similar check*
- b) proof of personal identity and any professional or other qualifications*
- c) the person's history of work involving children*
- d) references that address the person's suitability for the job and working with children.*

*It is a requirement that all applicants complete this form. You must complete all parts of the form. Any false or incomplete statement or information in this form or in connection with your application for employment may lead to a rejection of your application for employment. Any information provided by you in this form may be checked by the prospective employer with relevant authorities, previous employers, referees or sources. By signing or submitting this form you consent to these pre-employment checks. Information provided will be treated in accordance with the Privacy Act 1988 (Cth).*

**PLEASE CONTINUE TO NEXT PAGE**



<b>CURRENT EMPLOYMENT</b>	<b>CURRENT PLACE OF EMPLOYMENT</b>	<b>POSITION</b>
	<b>ADDRESS OF CURRENT PLACE OF EMPLOYMENT</b>	<b>PHONE NUMBER</b>
		<b>DATE BEGAN</b>
	<b>DUTIES (FOR EXAMPLE: SUBJECTS/GRADES TAUGHT IF CURRENTLY TEACHING)</b>	

<b>PREVIOUS EMPLOYMENT</b>	<b>EMPLOYER'S NAME AND ADDRESS</b>	<b>POSITIONS/DUTIES</b>	<b>DATES</b>	
			<b>FROM</b>	<b>TO</b>
<i>(Note: You must list all previous employers. If more space is required, attach a separate sheet)</i>				

<b>VOLUNTEER WORK</b>	<b>ORGANISATION'S NAME AND ADDRESS</b>	<b>POSITIONS/DUTIES</b>	<b>DATES</b>	
			<b>FROM</b>	<b>TO</b>
<i>(Note: You must list all previous places of volunteer work where such work involved children. If more space is required, attach a separate sheet)</i>				



**3. Have you ever been found guilty of a criminal offence or are you currently facing criminal charges?**

NO

YES

If yes, please provide details:


**4. Do you consent to the prospective employer contacting the appropriate person at any or all of your current or former employers (including any retired person who at the relevant time may have been employed by a former employer) to confirm the accuracy of your answers in questions 1–3 above and to ask about your suitability to work with children?**

NO

YES

If no, this will be discussed further if you are offered an interview.

**PLEASE CONTINUE TO NEXT PAGE**

## **APPLICANT DECLARATION**

I declare that the contents of this form are true and correct and complete to the best of my knowledge and no information concerning my employment history has been withheld.

I understand that any wilfully incorrect or misleading answer or material omission which relates to any of the questions in this form may make me ineligible for employment, or if employed, liable to disciplinary action which may include dismissal.

I understand that all applicants are required to undergo background screening which may include a National Police Record Check. I consent to such screening and checks in connection with my application for employment. I consent to the prospective employer making inquiries of any current and/or previous employers in connection to the information and answers I have provided in this form to verify the accuracy of the information in this form and to confirm my ability to carry out the inherent requirements of the position including my suitability to perform child-connected work. I understand and accept that my appointment to this position requires compliance with the school's child-safe policy and code of conduct. I have read and understand the school's child-safe policy and code of conduct.

I understand and accept that my appointment to this position requires a commitment to Catholic Education. I have read and understand the Statement of Principles regarding Catholic Education.

I understand that, in accordance with the COVID-19 Mandatory Vaccination (Specified Facilities) Directions, I will be required to provide acceptable vaccination information for the school to collect, record and hold during my employment.

**Signature**

**Date**