



Lake Joondalup Baptist College

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Internet: www.ljbc.wa.edu.au

Ph: 08 9300 7444
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Employment Application Form *(please print)*

Position Applied for: _____ Date: _____

Position type: Full time Part time Relief

How did you hear about this position?

West Australian Seek LJBC Web site Word of mouth

Other *(please specify)* _____

Personal Details

Gender: Male Female

Title: Mr Mrs Ms Miss Other _____

Surname: _____ First Name: _____

Address: _____

Postcode: _____

Telephone Home _____ Work _____

Mobile _____ Email _____

(Please tick the preferred method of contact)

Are you an Australian Resident? Yes No

If No, do you have a current Working Visa? Yes No

If you are not an Australian Resident you are required to provide documentary proof of your legal entitlement to work in Australia.

Are you registered to teach in Western Australia? Yes No

WA College of Teaching
Membership No: _____ Category: _____ Expiry Date: _____

Do you hold a valid Working with Children Check Card Yes No

WWCC Card No: _____ Card Expiry Date: _____

You will be required to provide a current Department of Education & Training Police Clearance, no more than three months old. An application form can be downloaded from the College web site.

Medical History

Please specify any disability, serious illness or disease which may prevent you from performing the duties required of the position:

Do you suffer from any back, neck, shoulder or knee complaints? Yes No

If Yes, give details: _____

Are you required to take medication which may affect your work performance or attendance? Yes No

How much time have you lost from work in the past three years due to illness? _____

Would you be willing to take a medical examination? Yes No

Would you be willing to take an alcohol and other drug test? Yes No

Have you ever claimed Workers' Compensation for injuries which may affect on your ability to perform the duties required of the position? Yes No

If Yes, please give details: _____

Important Notice: Section 79 of the Workers' Compensation and Rehabilitation Act 1981 states:
"Where it is proved that the worker has, at the time of seeking or entering employment in respect of which he claims compensation for a disability, willfully and falsely represented himself as not having previously suffered from that disability, a dispute resolution body may in its discretion refuse to award compensation which otherwise would be payable."

Employment Details

Are you currently employed? Yes No

Current Employer: _____

Current Position: _____ Length of Service: _____

Please provide details of previous employers in the last five years:

Employer	Position Held	Dates of Employment

Please provide details of Tertiary Qualifications and Training:

Degree, Diploma etc	Name of Institution	Date Completed

Please list the names, position and contact details for three Professional Referees:

Referee Name	Company and Position Held	Contact No

Please complete the following questions:

Describe your spiritual journey to this point: _____

What has been your involvement with the Christian Church over the last five years: _____

If a student asked you the question: "How could I become a Christian?", how would you answer them?

Please attach your detailed Resume, together with all documentation as requested in the application process.

Statement of Declaration

I declare that the information provided in the above Employment Application Form is true and accurate, and I acknowledge that any misrepresentation of facts is sufficient for dismissal.

Name: _____

Signature: _____ **Date:** _____