

Relief Staff Application Form							
Relief Teaching Relief Ed Assistant Relief Admin							
Personal Details							
Male Female Date of Birth (optional)							
Title: Surname: First name:							
Home address:							
Suburb: Postcode:							
Telephone: Home Mobile							
Email:							
Are you an Australian citizen: Yes No							
If no, do you have a current Working Visa: Yes No							
You will be required to provide proof of Australian birth, Citizenship or Residency. Alternatively, a current Working Visa must be provided to confirm proof of your legal entitlement to work and reside in Australia.							
Medical information : Do you have any medical or health condition or other factor relating to your health, which may prevent you from performing safely the duties required of the position? Yes No							
If yes, please provide details:							
Employment Clearance Check							
Relief Teachers							
Are you registered to teach in Western Australia Yes No TRUMANA AND TRUE TO BE							
TRBWA Member No: Category Expiry Date							
(WA) Working with Children Check Card No: Expiry Date							
Relief Ed Assistants/Relief Admin							
(WA) Working with Children Check Card No: Expiry Date							

You will be required to provide a Nationally Coordinated Criminal History Check, cleared through the 'Screening Unit'

of the Department of Education (less than six months old).

Qualifications

Please provide details of any qualifications and training below:

Degree/Diploma/Certificates	Name of Institution	Major area of Study	Date completed

Employment History

(List current or most recent employer first)

Name of Employer	Position held	Dates employed	FTE

K-12 Relief Teachers (only)

Please list Secondary subjects taught and/or Primary years level taught

1	
2	
3	
4	
5	
6	

that any misrepresentation of facts is sufficient for dismissal. Name:											
Referee name	Monday		Tuesday	Wedne		sday		Thursday		Friday	
Referee name Company Position held Contact Number Statement of Declaration Certify that the information provided by me in this Application Form is true and accurate and I acknowledge that any misrepresentation of facts is sufficient for dismissal. Name:											
Referee name	Professional Referees										
Statement of Declaration Certify that the information provided by me in this Application Form is true and accurate and I acknowledge that any misrepresentation of facts is sufficient for dismissal. Name:	Please list a mir	nimum	of two professional	refere	es						
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Signature: Date:	that any misrepresentation of facts is sufficient for dismissal.										
	Signature:					Date	e:				

Availability (please tick)