

THE RIVERINA ANGLICAN COLLEGE



# Application for Employment - Support Staff

Please return this form to:

**The Principal's Assistant**

**EMAIL**

[susan.gould@trac.nsw.edu.au](mailto:susan.gould@trac.nsw.edu.au)

**POST**

The Principal's Assistant  
The Riverina Anglican College  
PO Box 5467  
WAGGA WAGGA NSW 2650

T (02) 6933 1811  
W [trac.nsw.edu.au](http://trac.nsw.edu.au)



# Application for Employment -Support Staff

## Independent Schools NSW (Support & Operational Staff) Multi Enterprise Agreement 2017

Thank you for your interest in employment at The Riverina Anglican College.

When completed, please return this application form along with your CV to the Principal's Assistant.

**This application should be supported by a letter addressing the criteria/position requirements.**

### 1. POSITION

Position of: .....

☐ Permanent ☐ Temporary ☐ Full-time ☐ Part-time ☐ Casual

### 2. PERSONAL DETAILS

Surname: .....

Given names: .....

Title ..... Date of Birth: ...../...../..... Gender: .....

Former names: .....

Permanent Address: .....

.....Postcode: .....

Postal Address: .....

Telephone: Home: ..... Mobile: .....

Email address: .....

Country of Birth? Australia ☐ Other – please specify .....

Australian Citizen ☐ or Permanent Resident ☐

If neither Australian Citizen or Permanent Resident: VISA CATEGORY: .....

(Please attach a copy of your Work VISA)

Church currently attending: .....

How long: .....

WWCC Clearance Number: .....

(Please attach copy of letter from the Office of the Children's Guardian)

<b>Office Use Only</b>	WWCC Expiry Date: ...../...../.....	WWCC Verification Date: ...../...../.....
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### 3. EDUCATION

#### SECONDARY EDUCATION

Highest Award	School Attended	Year of Award

#### TERTIARY EDUCATION (including current incomplete courses)

Name & Location of Institution	Years of Attendance	Award Conferred	Date Conferred

#### RELEVANT TRAINING OR DEVELOPMENT (within the last 3 years)

Name & Location of Institution	Years of Attendance	Award Conferred	Date Conferred

### 4. EMPLOYMENT HISTORY

#### PRESENT EMPLOYMENT:

Name of Employer: .....

Address of Employer: ..... Postcode: .....

Name of Manager: .....

Commencement Date: .....

Current Position: .....

Other Position(s) Held

With Present Employer: .....

.....

.....

Current Salary: .....

**PAST EMPLOYMENT:** (in reverse order from most recent employer)

From	To	Name & Address of Employment	Full-Time/Part-Time/Casual	Years Completed

## 5. DECLARATION

Do you have any illness/injury/health problems that may render you

Unable to carry out the inherent requirements of this position?

☐ Yes ☐ No

*If you have answered Yes to any of the above questions, please attach details.*

**I certify that the information provided by me in this application form is complete and correct in every detail, and I understand that deliberate inaccuracies or omissions may result in non-acceptance of this application and/or termination of any employment that may be offered.**

.....  
**Applicant's Signature**

.....  
**Date**

## 6. ATTACHMENTS

Listed below are documents relevant to your application. Please submit copies that have been verified as true copies of the original by either Justice of the Peace or a Solicitor.

**Please note that copies are required of all applicable documents. Please tick where attached.**

- ☐ 1. '100 point' proof of identity (eg passport, birth certificate & licence/Medicare card)
- ☐ 2. 'Proof of citizenship / Australian residency (eg birth certificate, passport, visa)
- ☐ 3. Working with Children Check Clearance number
- ☐ 4. Details of any relevant employment screening matter
- ☐ 5. Details of any relevant illness/injury
- ☐ 6. Copy of working VISA if applicable
- ☐ **Please return my documents, as appropriate, if my application is unsuccessful**