

Application Declaration

For your application to be considered in any capacity in Alive Catholic Early Learning, you must complete all parts of this Declaration, including by providing additional, supporting information and documentation where a "Yes" response has been recorded. Your application will not be considered unless you complete the Declaration and provide comprehensive and complete information as necessary.



SURNAME: _____ **Dr / Mr / Mrs / Ms / Other**

GIVEN NAMES: _____

FORMER NAMES: _____ *please ensure your FULL name is included*

DATE OF BIRTH: _____

ADDRESS: _____ **P/Code:** _____

EMAIL: _____

TELEPHONE: **HOME:** _____ **MOBILE:** _____

Teacher Registration No. (if applicable) _____

Please note: You must provide the **ORIGINAL TRB** issued teacher registration certificate (if applicable) and evidence of a valid, current **DHS issued Working With Children Check (WWCC)** for sighting at your work location.

POSITION FOR WHICH APPLICATION IS MADE:

Please respond to the questions below and sign the Declaration at the end of this form:

		Yes (x)	No (x)
1.	Have you ever been investigated, charged, arrested, reported for or pleaded or found guilty of any criminal offence? (Tick 'No' where an expiation notice only was received)		
2.	Have you ever received a written counselling or warning or been dismissed or resigned following allegations of improper or unprofessional conduct or unsatisfactory work performance?		
3.	Have you ever or are you currently the subject of an investigation or any other process relating to alleged unsatisfactory performance or misconduct by you as an employee?		
4.	Have you ever been the subject of allegations of misconduct by you of a sexual nature towards or in relation to a child (person under 18 years of age) or towards any other person to whom you were responsible for providing education or other services?		
5.	Our process includes asking referees whether there are any child protection concerns in your regard. Do you foresee any problem arising from this process?		
6.	(If applicable) Do you have conditions on your SA teacher registration?		

Please note: If you answer YES to any of the above questions, you are required to provide comprehensive supporting details, including relevant documentation in order for your application to be considered. (Please attach as separate sheets.)

If you choose not to answer one or more of the above questions, please indicate by ticking the box below that you wish to meet with the Director (or delegate) to discuss.

I have opted not to answer one or more of the above questions and ask that a meeting be arranged between the Director (or their delegates) and me. ('x').	
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Please note: If you wish a meeting to be arranged you must submit your application at least one week prior to the closing date.

Further information and ongoing requirements

Evidence of a criminal history that may be unrelated to any risk of harm to children will not automatically preclude a person from being or remaining employed.

The requirement for full and honest disclosure is a condition of initial and ongoing engagement. In signing this form you declare that you are a fit and proper person of good character, and if you are successful in your application, you will notify the **Director** should there be a relevant change in your circumstances; for example, criminal charges and convictions, restraining orders, intervention orders, injunctions, disciplinary proceedings and investigations.

If you are charged with, convicted of, or granted bail in relation to a sexual offence against a child you are required to inform the **Head of Early Learning** immediately and if you are accused, convicted or granted bail you will need to immediately cease providing services to Alive Catholic Early Learning.

Declaration

I understand that any false or misleading information I provide will result in my application not being considered or may result in the termination of my application. I declare that I have answered this Application Declaration Form truthfully.

Signed:

Date:

OFFICE USE:	
HR Officer signature: _____	Date: _____
Referred on: _____	Date: _____