



For the Whole of Their Life

# Application for Employment Teacher

**St Philip's Christian College, Gosford**  
20 Narara Creek Road  
P O Box 640  
Gosford NSW 2250  
Ph: (02) 4324 4744  
Fax: (02) 4323 4848  
gosford@spcc.nsw.edu.au  
www.spcc.nsw.edu.au

Position:  Date:

## A PERSONAL INFORMATION



Name: SURNAME  GIVEN NAMES

Address: No / STREET   
SUBURB  STATE  POSTCODE

Phone: HOME  WORK  MOBILE

Email Address:

Age:  DOB: DD/MM/YEAR  Place of Birth:

Marital Status:  No. of Children:  Ages:

Condition of health: Excellent  Good  Fair

Working with Children Check / Application Number:

Have you ever been arrested or convicted of any criminal act?  
If yes, please give details:

Next of Kin:  Phone:

## B PROFESSIONAL PREPARATION

What degrees, diplomas or other professional qualifications do you hold?

DEGREE, DIPLOMA ETC...	NAME OF INSTITUTION	YEARS OF TRAINING	YEAR CONFERRED
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

What grades / subjects are you qualified to teach?

Do you have a teaching certificate / teaching registration?

Teaching Accreditation Number:  Status:

*Please provide  
copy of document*

**B** PROFESSIONAL PREPARATION

Do you have any other qualifications?

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Give details of your teaching experience. Include dates, names of schools, and years and subjects taught.

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Indicate your total experience:

YEARS

MONTHS

List any positions of special responsibility you have held, and length of time.

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List any areas of special training, experience or interest?

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Provide details of professional associations of which you are a member.

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.....

**C** CHRISTIAN COMMITMENT

Do you consider yourself to be a true Christian?

.....

Which Church do you regularly attend?

.....

Pastor / Minister's Name:

.....

Phone:

CHURCH

MOBILE

Email Address:

.....

Address:

No / STREET

SUBURB

STATE

POSTCODE

Give a brief outline of your involvement in your Church and/or other Christian work.

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Referees will be contacted by the College to discuss your suitability for the position you have applied for.

**CHARACTER**

Name:	<input type="text" value="SURNAME"/>		<input type="text" value="GIVEN NAMES"/>		
Address:	<input type="text" value="No / STREET"/>				
	<input type="text" value="SUBURB"/>		<input type="text" value="STATE"/>		<input type="text" value="POSTCODE"/>
	<input type="text" value="HOME"/>		<input type="text" value="WORK"/>		<input type="text" value="MOBILE"/>
Phone:					
Occupation:	<input type="text"/>		Email:	<input type="text"/>	
What is your association with this referee?	<input type="text"/>				

**PASTOR / MINISTER**

Name:	<input type="text" value="SURNAME"/>		<input type="text" value="GIVEN NAMES"/>		
Address:	<input type="text" value="No / STREET"/>				
	<input type="text" value="SUBURB"/>		<input type="text" value="STATE"/>		<input type="text" value="POSTCODE"/>
	<input type="text" value="HOME"/>		<input type="text" value="WORK"/>		<input type="text" value="MOBILE"/>
Phone:					
Occupation:	<input type="text"/>		Email:	<input type="text"/>	
What is your association with this referee?	<input type="text"/>				

**PROFESSIONAL**

Name:	<input type="text" value="SURNAME"/>		<input type="text" value="GIVEN NAMES"/>		
Address:	<input type="text" value="No / STREET"/>				
	<input type="text" value="SUBURB"/>		<input type="text" value="STATE"/>		<input type="text" value="POSTCODE"/>
	<input type="text" value="HOME"/>		<input type="text" value="WORK"/>		<input type="text" value="MOBILE"/>
Phone:					
Occupation:	<input type="text"/>		Email:	<input type="text"/>	
What is your association with this referee?	<input type="text"/>				

I confirm that the above information is correct and that I would be supportive of the Christian Ethos of the College. I understand that any misleading statements or omissions made by me may be sufficient grounds for cancelling any agreements made.

Signature:  Date:

*NB: Please provide with this application references, transcripts of academic attainment and teaching reports.*

Outcome of WWCC verification:

Date of verification:

Expiry Date:

**REFEREE 1 - CHARACTER**

Contacted:

YES

Date:

By Whom:

***Summary of Referral*****REFEREE 2 - PASTOR / MINISTER**

Contacted:

YES

Date:

By Whom:

***Summary of Referral*****REFEREE 3 - PROFESSIONAL**

Contacted:

YES

Date:

By Whom:

***Summary of Referral***