



St Joseph's School, Northam

PO Box 500 Northam WA 6401
Email :admin@sjsnortham.wa.edu.au

Primary Campus: Lance Street ~ Telephone (08) 9621 3500 Fax (08) 9622 5188
Secondary Campus: Wellington Street ~ Telephone (08) 9621 3550 Fax (08) 9622 3655

Application for the position of

Primary Teacher

Name: _____

1. Please fill in **ALL** sections of this form, even if you wish to attach a Curriculum Vitae.
2. Your covering letter should explain your reasons for applying for this position **AND** any other relevant information you may wish to include.
3. Please attach this Application Form to your letter of application and forward to the Principal's Secretary by 3.00pm on Friday 6 October 2017. Email applications to admin@sjsnortham.wa.edu.au All queries should be directed to the Principal's Secretary on 9621 3502.
4. The Principal reserves the right to seek information from people not listed in your application, unless specifically requested not to do so.
5. Applicants will be expected to uphold the Catholic ethos of the College.
6. **In accordance with regulations for employee screening it is necessary for all new staff in Catholic schools to be a member of the Teacher Registration Board of WA before commencing their duties. New staff must also have a current Working With Children Card.**
7. All teachers must obtain an Accreditation to Teach in a Catholic school. Teachers of Religious Education shall have completed, or undertake to complete, Accreditation to Teach Religious Education.
8. In applying for this position you will be providing St Joseph's School Northam with personal information. We can be contacted at PO Box 500 NORTHAM WA 6401 by telephone: 9621 3500 or fax: 9622 5188.
9. If you provide us with personal information, for example your name and address or information contained on your resume, we will collect the information in order to assess your application. By submitting this application you agree that we may store this information for as long as necessary.
10. You may seek access to the personal information that we hold about you if you are unsuccessful for the position. However, there may be occasions when access is denied. Such occasions would include where access would have an unreasonable impact on the privacy of others.
11. We will not disclose this information to a third party without your consent.
12. If you provide us with the personal information of others, we encourage you to inform them that you are disclosing that information to the School and why, that they can access that information if they wish, that the School does not usually disclose the information to third parties and that we may store their information for as long as necessary.

1. **Name:** _____
 (Surname) (Christian Name) (Title)

Address: _____

_____ **Postcode:** _____ **Home Phone:** _____

Mobile: _____

Email Address: _____

Business Address: _____

_____ **Postcode:** _____ **Work Phone:** _____

Date of Birth: _____

2. **Religion:** _____ **Parish:** _____ **Priest/Minister:** _____

3. **TRBWA No.:** _____ [Please attach copy]

4. **Working With Children Card No.:** _____ [Please attach copy]

5. **SECONDARY EDUCATION QUALIFICATIONS**

Qualifications	School	Year Awarded

6. **TERTIARY EDUCATION QUALIFICATIONS** (Attach photocopies, NOT originals of degrees certificates, results statements, etc.)

Qualifications	Institution	Year Awarded	Full Time Study Equivalent

Major Learning Area		Minor Learning Area	
Subjects	No. of Units	Subjects	No. of Units

7. ACCREDITATION IN A CATHOLIC SCHOOL

Please list accreditation information.

Accreditation	Renewal date

8. EDUCATIONAL LEADERSHIP EXPERIENCE

Please list all previous leadership appointments, commencing with the most recent.

School	Leadership Position	No. of years in position

9. TEACHING EXPERIENCE

Please list all previous teaching appointments commencing with the most recent.

School	Year of Appt.	No. of years in school	Subjects/Courses	Year Level

10. GENERAL TEACHING PREFERENCE

Please list subjects and year levels in order of preference.

Subject/Course
1.
2.
3.
4.
5.

11. RELEVANT PERSONAL PROFESSIONAL DEVELOPMENT

Give details of courses, conferences, and seminars attended within the past three years that relate to this position. Please list from most recent.

Year (please list from most recent)	Conference/Seminar	Relevance to position

12. MEMBERSHIP OF PROFESSIONAL ORGANISATIONS

13. REFEREES *(Attach photocopies of testimonials or references if you wish)*

Professional:

Name: _____

Position: _____

Address: _____

_____ Postcode: _____ Telephone: _____

Mobile: _____

Professional:

Name: _____

Position: _____

Address: _____

_____ Postcode: _____ Telephone: _____

Mobile: _____

Parish Priest:

Name: _____

Position: _____

Address: _____

_____ Postcode: _____ Telephone: _____

Mobile: _____

I certify that all the information provided is true and accurate.

Signature of Applicant: _____ **Date:** _____