



EMPLOYMENT APPLICATION FORM

Your appointment will be subject to satisfactory employment screening as is required under the NSW Child Protection (Prohibited Employment Act 1998).

APPLICATION FOR THE POSITION OF: _____

DATE: _____

NAME IN FULL: _____

ADDRESS: _____

TELEPHONE:(Bus.Hours) _____ Home:) _____

MOBILE: _____ FASCIMILE: _____

EMAIL: _____

DATE OF BIRTH: _____ PLACE OF BIRTH: _____

PLACE OF EDUCATION:

(a) School: _____

(b) University _____

(c) Degree: _____

Major studies: _____

How are you willing to support the Christian ethos of the School?

Total teaching experience: _____ years **(Current Step if known)** _____

Other employment experience relevant to the position:

Have you ever been charged with any criminal offence?

Yes _____ **No** _____

If yes, please give details.

Name and contact numbers of a Referee who can be contacted as to character:

(a) _____

(Work) _____ (Home) _____

I give consent for MLC representatives to communicate with the following two Referees to discuss education, teaching ability and experience:

(a) _____

(Work) _____ (Home) _____

(b) _____

(Work) _____ (Home) _____

Please attached your curriculum vitae and forward to:

**The Principal,
MLC School,
PO Box 643
BURWOOD, NSW 1805**