Lutheran School Wagga Wagga



APPLICATION FOR RELIEF/CASUAL EMPLOYMENT

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iven Names			
lailing address			
mail address			
ontact telephone nu	umbers		
vnat type of employ	ment e.g. teaching, learnir	ig assistant?	
DUCATION Year Graduated	Course Duration	Institution	Qualification
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	Course Duration	Institution	Qualification
	Course Duration	Institution	Qualification
	Course Duration	Institution	Qualification
Year Graduated	Course Duration	Institution	Qualification

RELEVANT EMPLOYMENT HISTORY

Start date	End date	Position	Employer	Roles and Responsibilities

REFERENCES

Name	Title and Organisation Name		Phone				
Working with Children Check cleara	nce number						
Date of Birth (used to verify Working	g with Children Check)						
I am available for casual work on the following days:							
Monday Tuesday	Wednesday \square	Thur	rsday 🗌 Friday 🗎				
If any, how much advance notice do	you require?						
Are you able to accept a phone call a	t 6:30am?						
Comments							
TEACHING STAFF ONLY							
NESA Accreditation status							
NESA Accreditation number							
Specialist area(s) (if applicable)							
Year level preference (Kindergarten to Year 6)							
Please include your CV and certified copies of qualifications and a copy of your clearance letter from NSW							
Office of the Children's Guardian with this application.							
Applicant's Signature		_ D	Pate				

Thank you for your interest in employment at Lutheran School Wagga Wagga