



MELTON CHRISTIAN COLLEGE

EMPLOYMENT APPLICATION

PERSONAL DETAILS

Position Applied for _____

Surname _____ Given Names _____

Title (Mr/Mrs/Miss/Ms/Dr) _____ Mobile _____

Address _____ Postcode _____

Email _____

Date of Birth _____ Country of Birth _____

Victorian Institute of Teaching Registration Number _____

EDUCATION

Tertiary Qualifications	Year of Completion	University/Institute	Majors/Specialisms
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_____	_____	_____	_____
_____	_____	_____	_____

Other Qualifications	Year of Completion	University/Institute	Majors/Specialisms
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_____	_____	_____	_____
_____	_____	_____	_____

EMPLOYMENT HISTORY

Teaching Experience

School Name	Dates of Employment D/M/Y to D/M/Y	Full-Time or Time Fraction (e.g. 0.4)	Classes / Year Levels & Subjects Taught	Position of Responsibility (if applicable)

Other Relevant Work Experience

SPECIAL INTERESTS

Describe your particular educational interests:

Describe areas of special training, experience or interests that you believe could be a valuable contribution to the College:

Provide a brief statement of your educational philosophy, including your view of Christian schooling.

CHURCH INVOLVEMENT

Are you affiliated with any Christian Church? If so, please provide the name of your church and details of your involvement

REFEREES

Educational or Professional Referees

Name	Position	Phone No.
		BH: AH: Mob:
		BH: AH: Mob:

Personal Referees (include a church referee if possible)

Name	Position	Phone No.
		BH: AH: Mob:
		BH: AH: Mob:

May Melton Christian College contact your referees prior to an interview? (Y/N) _____

You may attach any other relevant information in support of your application.

Employment Collection Notice under the Privacy Act 1988

In applying for this position you will be providing Melton Christian College with personal information. We can be contacted on 9732 3000 during normal office hours.

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 completing this application you agree that we may store this information for *6 Months*.

You may seek access to your personal information that we hold about you if you are unsuccessful for the position. However, there will be occasions when access is denied. Such occasions would include where access would have an unreasonable impact on the privacy of others.

We will not disclose this information to a third party without your consent.

We are required to conduct a criminal record check under various school requirements and if successful for the position you will be asked to complete a criminal records check form.

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 *6 months*

Have you ever submitted a Workers Compensation Claim or any Disability Claim (Y/N)? _____
If yes please specify:
All applicants should be aware of Section 79 Workers Compensation Board and Assistance Act 1981. 79. Where it is proved that the worker has, at the time of seeking or entering employment in respect of which he/she claims compensation for a disability, wilfully and falsely represented himself/herself as not having previously suffered from the disability, the School may in its discretion refuse to award compensation which otherwise would be payable.
APPLICANT'S SIGNATURE: _____ DATE _____
I acknowledge having read the Employment Collection Notice and acknowledge that the deliberate giving of false information on this application will lead to this application being not accepted

Please return your application to: Melton Christian College
152-156 Brooklyn Road, Brookfield, Victoria 3338
Tel: (03) 9732 3000 Fax: 9747 0909
By email to: careers@mcc.vic.edu.au