



ST.BRIGID'S  
COLLEGE

*200 Lesmurdie Road, Lesmurdie WA 6076*

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*E-mail: [sbchr@stbrigids.wa.edu.au](mailto:sbchr@stbrigids.wa.edu.au)*

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***APPLICATION FOR THE POSITION OF:*** \_\_\_\_\_

***COMMENCING:*** \_\_\_\_\_

***Please forward this application and relevant attachments to the Principal  
by the closing date***

***CONFIDENTIAL TO THE PRINCIPAL, RELEVANT SENIOR STAFF AND  
PANEL MEMBERS***

**APPLICATION FORM**

1. Name

\_\_\_\_\_

Surname	First Name	Mr/Mrs/Miss/Ms
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Address

\_\_\_\_\_

Post Code: \_\_\_\_\_ Telephone: \_\_\_\_\_

Mobile: \_\_\_\_\_

Fax: \_\_\_\_\_

2. Are you an Australian Citizen?

YES  / NO

If No, have you been granted permanent residency?

\_\_\_\_\_

3. Are you Catholic?

YES  / NO

If Yes, Parish Priest:

\_\_\_\_\_

Parish Name & Phone No:

\_\_\_\_\_

4. Health: Do you have any health related problems, disabilities or injuries that may adversely affect your performance in the position for which you have applied or the safety of others?

YES  / NO

If YES please provide details:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

5. Professional Qualifications

(Attach photocopies, NOT originals of certificates)

Qualifications	Institution	Year Awarded	Full Time Study Equivalent

**6. Ongoing/Present Study**

<b>Qualifications</b>	<b>Institution</b>	<b>Year Awarded</b>	<b>Full Time Study Equivalent</b>

**7. Teaching Experience (IF APPLICABLE)**

Please list all previous teaching appointments commencing with the most recent

<b>Institution</b>	<b>Year of appointment</b>	<b>No. of years in school</b>	<b>Subjects Taught</b>	<b>Year Level</b>
<b>Equivalent full-time over all teaching positions:</b>				

**8. Administrative Experience**

<b>Organisation</b>	<b>Position Title/Description</b>	<b>Years Held</b>

**9. Religious Education Qualifications (IF APPLICABLE)**

<b>Qualification</b>	<b>Institution</b>	<b>Year Awarded</b>	<b>Full Time Equivalent</b>

**10. Other relevant Religious Education Experiences: i.e. Seminars, In-service**

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**11. Accreditation (IF APPLICABLE)**

What levels of Accreditation as required by the Catholic Education Office of WA have you completed?

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**12. Parish Ministry Involvement**

Please list below any form of parish ministry or activity in which you are or have been involved.

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**13. Long Service Leave**

When was your last period of Long Service Leave taken?

When is your next period of Long Service Leave due?

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**14. Referees:** Names and addresses of persons who have consented to act as referees. The Principal reserves the right to contact persons not nominated by the applicant.

**14.1 Professional Referee:**

**Position:**

**Work Address:**

**Telephone:**

**Fax:**

**Mobile:**

**14.2 Professional Referee:**

**Position:**

**Work Address:**

**Telephone:**

**Fax:**

**Mobile:**

**14.3 Professional Referee:**

**Position:**

**Work Address:**

**Telephone:**

**Fax:**

**Mobile:**

**14.4 Current Employer:**

**Position:**

**Work Address:**

**Telephone:**

**Fax:**

**Mobile:**

**15. Where did you hear about this position:**

**Newspaper e.g. West Australian, Australian:**

**Catholic Education Office website employment page:**

**Seek advertising:**

**Other:** \_\_\_\_\_

**Signature of Applicant:**

**Name:** \_\_\_\_\_

**Date:** \_\_\_\_\_

## **DECLARATION**

I declare that all information provided in this application is true in all respects.

I declare that there are no other circumstances or factors that would adversely affect my ability to undertake the role for which I am applying.

I consent to any reference checks which may be necessary to support this application.

I understand that employment with St Brigid's College is conditional upon providing appropriate evidence in support of information contained in this application where necessary.

I understand that I must provide:

- Department of Education National Police History Check
- TRBWA registration
- Working with Children Clearance or be willing to obtain.

I understand that St Brigid's College is a smoke free workplace.

I understand that all staff at St Brigid's College must be committed to upholding the Catholic and Mercy ethos.

**Signature of Applicant:**

**Name:**

**Date:**

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