



ST JOHN BOSCO  
COLLEGE  
JOY IN LEARNING

## RELIEF STAFF REGISTRATION FORM

### 1. AREA

Administration  Uniform Shop  OSHC  Teaching  Education Assistant   
 Early Childhood  Early Childhood   
 Primary  Primary   
 Secondary  Secondary   
 Special Education (Primary)   
 Special Education (Secondary)

### 2. AVAILABILITY

MON  TUE  WED  THU  FRI

Have you worked in WA Catholic system (last 6 months) ?

### 3. Name:

\_\_\_\_\_ (Surname) (Christian Name) (Title)

Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_

Work Phone: \_\_\_\_\_

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

Email: \_\_\_\_\_

### 4. Religion:

Parish: \_\_\_\_\_

Priest/Minister: \_\_\_\_\_

### 5. TRBWA No.:(Teacher Only)

Copy attached: Yes No

### 6. Working With Children Card No.:

Copy attached: Yes No

### 7. EDUCATION QUALIFICATIONS

Qualifications	School	Year Awarded

**8. ACCREDITATION IN A CATHOLIC SCHOOL**

*Please list accreditation information.*

Accreditation

**9. EXPERIENCE**

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

School/College	Year of Appt.	No. of years in School/College	Year Level/Subject

Additional comments:

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**10. RECENT RELIEF EXPERIENCE**

School/College	Dates	Responsibility	Year Level/Subject

**11. REFEREES**

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

**Professional:**

Name:

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Position:

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Address:

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Phone:

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**Professional:**

Name:

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Position:

\_\_\_\_\_

Address:

\_\_\_\_\_

Phone:

\_\_\_\_\_

**Professional:**

Name:

\_\_\_\_\_

Position:

\_\_\_\_\_

Address:

\_\_\_\_\_

Phone:

\_\_\_\_\_

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

**Signature of Applicant:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**THE FOLLOWING DOCUMENTATION MUST BE PROVIDED BEFORE EMPLOYMENT CAN BE OFFERED:**

- Curriculum Vitae
- Copies of relevant Qualifications
- Nationally Coordinated Criminal History  
Check [www.det.wa.edu.au/screening/docs/police\\_clearance.pdf](http://www.det.wa.edu.au/screening/docs/police_clearance.pdf)
- Working with Children Check
- TRBWA (Teacher)