## **CESA Employment Declaration**

To be considered for employment in any capacity in CESA, you must complete all parts of this Declaration, including by providing additional, supporting information and documentation where a "Yes" response has been recorded. You will not be considered for employment unless you complete the Declaration and provide comprehensive and complete information as necessary. If you have any questions about the Declaration, please contact your school or CEO (Human Resources Team on 8301 6853)



in you have any queetione as				0001 0000).					
SURNAME:	Dr / Mr / Mrs / Ms / Other								
GIVEN NAMES:									
FORMER NAMES:									
DATE OF BIRTH:			please ensure v	our FUI I na	me and		is incl	uded	
ADDRESS:		please ensure your FULL name and DOB is included P/Code:							
					<u> </u>	coue.			
EMAIL:									
TELEPHONE:	HOME:		MOBILE:						
Teacher Registration	on No.		TRB / DCSI Expiry	Date:					
Please note: You must provide the ORIGINAL TRB issued teacher registration certificate (if applicable) and DCSI issued Child-Related Employment Screening Clearance for sighting at your work location. POSITION FOR WHICH APPLICATION IS MADE:									
POSITION FOR WH		ON IS MADE:							
-	-	and sign the Declaration a							
1. Have you ever been investigated, charged, arrested, reported for or pleaded or fo criminal offence? ( <i>Tick 'No' where an expiation notice only was received</i> )				ilty of any	Yes		No		
2. Have you ever received a written counselling or warning or been dismissed or resigned fol allegations of improper or unprofessional conduct or unsatisfactory work performance?				following	Yes		No		
		the subject of an investigation or misconduct by you as ar		elating to	Yes		No		
4. in relation to a ch		allegations of misconduct by 8 years of age) or towards or other services?			Yes		No		
		es whether there are any ch n arising from this process?		your	Yes		No		
6. (If applicable) Do	you have condition	ns on your SA teacher regis	stration?	N/A 🗖	Yes		No		
		of the above questions, yo ler to be considered for e					rting d	letails,	
If you choose not to an meet with the Principal		e of the above questions, gate) to discuss.	please indicate by ticki	ng the box b	elow t	hat you	ı wish	to	
I have opted not to answer one or more of the above questions and ask that a meeting be arranged between the <b>Principal /</b> <b>Director</b> (or their delegates) and me.									
	•	arranged you must submit y	our application at least o	ne week prioi	to the	closina	date.		
Further information an	-		.,	1		5			
Evidence of a criminal his or remaining employed.	istory that may be	unrelated to any risk of harr	m to children will not auto	matically pree	clude a	person	n from l	being	

The requirement for full and honest disclosure is a condition of initial and ongoing engagement. In signing this form you declare that you are a fit and proper person of good character, and if you are successful in your application, you will notify the Principal / Director should there be a relevant change in your circumstances; for example, criminal charges and convictions, restraining orders, intervention orders, injunctions, disciplinary proceedings and investigations.

## Declaration

I understand that any false or misleading information I provide will result in me not being considered for employment or may result in the termination of my employment. I declare that I have answered this Employment Declaration Form truthfully.

Signed:	Date: _		
OFFICE USE:			
Principal / Director signature:			
Referred on:	Date:		