



**ST EDMUND'S  
COLLEGE**  
CANBERRA · EST 1954

# Application for Employment

Where particular information is included in an accompanying Resume, please simply note "See Resume" in the relevant space.

**POSITION TITLE:** \_\_\_\_\_

## SECTION A: PERSONAL DETAILS

Surname: \_\_\_\_\_ Given Names: \_\_\_\_\_ Title: \_\_\_\_\_

Date Of Birth: \_\_\_\_\_ Residential Address: \_\_\_\_\_

\_\_\_\_\_ Postcode: \_\_\_\_\_

Address for correspondence: \_\_\_\_\_

\_\_\_\_\_ Postcode: \_\_\_\_\_

Telephone: Home: \_\_\_\_\_ Work: \_\_\_\_\_ Mobile: \_\_\_\_\_

Email Address: \_\_\_\_\_ Fax: \_\_\_\_\_

Religious Affiliation: \_\_\_\_\_ Parish (Of Worship): \_\_\_\_\_

## SECTION B: EDUCATION

### SECONDARY EDUCATION

Schools Attended	Years of Attendance	Certificate Awarded

### TERTIARY EDUCATION (PLEASE ATTACH DOCUMENTARY EVIDENCE)

Name/Location of Institution	Years of Attendance	Degree/Diploma/Certificate Conferred

Attach additional sheet if insufficient space

**SECTION C: PROFESSIONAL DEVELOPMENT**

**CURRENT STUDIES BEING UNDERTAKEN:**

Name/Location of Institution	Years of Attendance	Course(s) Being Undertaken

**RECENT AND RELEVANT PROFESSIONAL DEVELOPMENT:**

Details	Years

**SECTION D: EMPLOYMENT**

**CURRENT POSITION:**

Name of employer: \_\_\_\_\_

Name and Address of present place of employment: \_\_\_\_\_

\_\_\_\_\_

Current Position: \_\_\_\_\_ Date of appointment: \_\_\_\_\_

Description of Responsibilities: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

*Attach additional sheet if insufficient space*

**PAST POSITIONS: (Please commence with the most recent position)**

From	To	Name And Address Of Employment	Positions Held	Reason For Resignation/Termination

*Attach additional sheet if insufficient space*

**SECTION E: TEACHING EXPERIENCE (For teaching positions)**

Year(s)	School	Classes Taught Subject and Year Level

*Attach additional sheet if insufficient space*

**SECTION F: OTHER EXPERIENCE YOU CONSIDER RELEVANT**

From	To	Description

*Attach additional sheet if insufficient space*

**SECTION G: REFEREES**

Please provide the name, occupation, work address and contact phone numbers of three professional referees. These are to include your present employer (where relevant) who can comment on your professional performance.

Please note that confidential information will be obtained from these people.

Referee 1	
Name: _____	Address: _____
Phone Number: (H) _____	_____
(W) _____	Position: _____
Referee 2	
Name: _____	Address: _____
Phone Number: (H) _____	_____
(W) _____	Position: _____
Referee 3	
Name: _____	Address: _____
Phone Number: (H) _____	_____
(W) _____	Position: _____

**SECTION H: DECLARATION**

General State Of Health: \_\_\_\_\_

- I certify that the information contained on this form is accurate, and understand that if I have provided false or misleading information, it may result in a decision not to employ me or, if already employed, may lead to my dismissal

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Please return completed Application Form to:

Kathy Mumberson  
Administration Manager  
St Edmund's College  
110 Canberra Avenue  
GRIFFITH ACT 2603

If there is insufficient space to provide details on any sections of this form, please attach additional information as necessary