



**Georgiana Molloy Anglican School  
EMPLOYMENT FORM  
NON – TEACHING POSITIONS**  
(This form must be completed by the Applicant and returned with the letter of Application and Curriculum Vitae)

<b>Personal Information:</b>	Mr / Mrs / Ms / Miss / Dr / Other _____
	Full Name: _____
	Address: _____ P/Code: _____
	Date of Birth: _____ Email: _____
	Telephone: _____ Mobile: _____
<b>Position applied for:</b>	_____

Qualifications (Post-Secondary only)		
From Month/Year	To Month/Year	Qualifications (Post-Secondary only)

**Working With Children Check – current card – Yes / No (please circle):**

**Note:** Certified copy of WWCC card will be required from the successful applicant before employment.

Employment Experience					
From Month/Year	To Month/Year	Position	Employer	Full-time/ Part-time	State FTE if P/Time

**Health and Workers' Compensation:**

Considering the nature of the work as described to you, do you suffer from any medical condition or injury that could be exacerbated by this work? Yes or No:

Have you lodged any Workers' Compensation claims or received workers compensation in relation to injuries or illnesses that could be exacerbated by the work as described to you? Yes or No:

If yes to any of the above please give details.

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Signed:..... Date: .....