

EXPRESSION OF INTEREST IN BECOMING A REGISTERED EDUCATOR



It is an offence under the Commission for Children and Young People Act 1998 for a prohibited person to apply for child-related employment.

DATE:

Name: Ne: M / F D.O.B:

Address: Postcode:

Phone: Mobile: Email:

Customer Reference Number (CRN)

Place/Country Of Birth: Cultural background: Aboriginal Torres Strait Islander Other: Languages spoken:

Are you an Australian Citizen? Yes No → Do you have the legal right to work in Australia? Yes → No → **Please attach a certified copy of documentation confirming your work status**

Qualifications: Certificate III Children's Services completed enrolled Date:
 Diploma Children's Services completed enrolled
 Other education and care related: _____
 completed enrolled
 Other: _____
 completed enrolled
 First Aid (required prior to start)
 Asthma (required prior to start)
 Anaphylaxis (required prior to start)
 CPR (required prior to start)
 Child Protection (required prior to start)

Hobbies and Interests:

Spouse / Partner name: Ne: M / F D.O.B:

Place/Country Of Birth: Cultural background: Aboriginal Torres Strait Islander Other: Languages spoken:

Occupation: Employer:

Other adults in the home:	Name:	M / F	D.O.B:	Occupation/Employer:	Work/study times

Children in the home:	Name:	M / F	D.O.B:	Pre / school:	Days:

Are you registered as a **foster Carer**? Yes → please give details: No

FITNESS AND PROPRIETY (Regulation 143)

Have you ever been **registered** with another FDC Scheme or held a Home-Based license (with a relevant state or territory authority) ?
(*registration/s will be confirmed*)

- Yes → by whom + reason for leaving
 No

→ Period:

Have you ever had any **compliance or disciplinary action** raised in relation to the education and care services Law, a former education and care services law, a children’s services law, an education law, or any applicable Regulations?

- Yes → Briefly describe
 No

→ Outcome

Are you or have you ever been subject to a prohibition or suspension notice under the Education and Care Services National Law?

- Yes → Briefly describe
 No

Have you ever had a an **education and care services-related approval, license, registration, certification or other authorisation** refused, refused to renew, suspended, cancelled, or conditions imposed?

- Yes → Briefly describe
 No

→ Outcome

Have you ever been subject of **workplace proceedings or allegation** (including investigation or disciplinary action) relating to poor performance, conflict or breach of organisational policy/requirements?

- Yes → Briefly describe
 No

→ Outcome

Do you or any household members have any **medical conditions** that may affect your ability to provide a safe and quality education and care experience for children?

- Yes → please describe/explain
 No

Are you taking any **medications** that may affect your ability to provide a safe and quality education and care experience for children?

- Yes → please describe /explain
 No

Please attach pages to your application if you wish to provide additional information.

Please describe what has prompted your interest in becoming an Educator:

How will other people describe you as an Educator?

What various tasks, responsibilities and skills do you believe are involved in fulfilling the Educator role?

Tell us about any experience you have in caring for / working with children:

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What have you enjoyed the most / what has been most satisfying?

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What have you found most difficult/ challenging?

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What learning is important, and what kinds of activities, play and experiences do you do with children?

0 - 12 months:

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12 months - 2 yrs:

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2 - 3 yrs:

--	--

3 - 6 yrs:

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6 - 12 yrs:

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Describe the parenting style your family used when raising you as a child?

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What do you now do the same / differently when working with children?

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What impacts of providing FDC have you discussed with your family or household members? (eg, fulfilling other commitments, changes to routines, managing personal belongings, maintaining an alcohol-free environment, family members following scheme policies, etc)

What changes might you make to respond to these impacts?

How do you manage:

Upkeep and maintaining your premises:

Purchase and maintaining toys / equipment:

Keeping business records accurate and up to date:

Prioritising tasks

Maintaining confidentiality of information:

Variable bookings / vacancies / taking leave

Keeping up to date with changes:

Feeling under stress

Tell us about a time when you were able to successfully 'work' and build rapport with someone even when you had differing ideas or opinions, or you may not have personally liked each other - Why was the interaction/situation difficult? What did you do? What was the outcome?

Describe a decision you made or a situation that you would handle differently if you had the opportunity to do it over again? -

What happened? What led to your original action? What made you reflect on this? What informed your change of mind? What would you do differently? What did you learn? Why was it a real 'learning experience'?

Tell us about a difficult problem/situation or a 'set-back' in work you have dealt with -

What was the situation? What was difficult about it? What did you do? What was the outcome? What would have been helpful to you?

Describe a time when you have disagreed with a rule/policy, or you have had to handle a situation that challenged fairness or ethical issues –

What was the situation? What approach did you take? What was the outcome?

How do you measure your own success? –

How do you set goals? How do you reach them? What obstacles have you encountered? How did you overcome these?

Tell us about a time when a supervisor / colleague / mentor gave you feedback about your work / actions –

What was the situation? What feedback did you receive? How did you respond? What did you learn about yourself?

What has been the best 'work' experience / role / job you have ever had?

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What has been the worst 'work' experience / role / job you have ever had?

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What was different between the two experiences?

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What are the best things that you or work supervisors and colleagues have done that you wish everyone did?

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EMPLOYMENT HISTORY:

Period From to	Name and Address Of Employer	Name and Telephone Number of Supervisor	Position Held	Reason for Leaving

REFEREES:

Please nominate two referees, who are **not relatives**. Referees will be contacted by the Coordination Unit.

Name:	Name:
Address:	Address:
Contact Number:	Contact Number:
Relationship to applicant:	Relationship to applicant:

This information is collected in compliance with the principles of the Privacy and Personal Information Protection Act 1998 and accordingly will only be used for the purpose for which it is being collected.

DECLARATION

1 *Insert the name, occupation and address of person making the declaration* I, ¹ _____, _____
Full name *Occupation*
 Of _____, _____, _____
Address *Town* *Postcode*

make the following declaration under the *Statutory Declarations Act 1959*:

I have been convicted of: - (Please **only tick if applicable**)

- a crime or offence involving the death of another person; or
- a sex-related offence or crime, including offences of sexual assault against an adult or minor, child pornography, or an indecent act involving a minor; or
- a crime involving dishonesty, fraud, money laundering, insider dealing or any other financial offence or crime, including those under legislation relating to companies, banking, insurance or other financial services.

I have been convicted, found guilty, received an on-the-spot fine or court order relating to:-

- an apprehended violence order or protection order made against me; or
- one or more traffic offences involving speeding more than 30 kilometres over the speed limit, injury to a person or damage to property; or
- a crime or offence relating to the consumption, dealing in, possession or handling of alcohol, a prohibited drug, narcotic or other prohibited substance; or
- a crime or offence involving violence against or the injury of another person.

I have been convicted of any offence including an offence:-

- relating to the presence of prescribed concentration of alcohol in a person’s blood;
- relating to driving while under the influence of alcohol or any other drug;
- relating to driving a motor vehicle negligently if the person is found guilty is, by way of penalty, sentenced to imprisonment or fined a sum of not less than \$200;
- relating to driving a motor vehicle upon a road or road-related areas furiously or recklessly or at a speed or in a manner which is dangerous to the public;
- relating to menacing driving;
- relating to failing to stop after an accident;
- relating to refusing to produce a driver licence when required, refusing to state a name or home address or stating a false name or home address;
- relating to driving while unlicensed;
- any other offence under the road transport legislation if the court orders the disqualification of the person found guilty from holding a driver licence.

The information provided in this Expression of Interest is accurate and correct.

I understand that a person who intentionally makes a false statement in a statutory declaration is guilty of an offence under section 11 of the *Statutory Declarations Act 1959*, and I believe that the statements in this declaration are true in every particular.

2 *Signature of person making the declaration* ² _____ date: _____
Signature of person making the declaration

3 *Place* Declared at ³ _____ on ⁴ _____ of ⁵ _____, ⁶ _____
⁴ *Day* *Place* *day* *month* *year*
⁵ *Month* ⁶ *Year*

7 *Full name, qualification and address of person before whom the declaration is made* Before me, ⁷ _____, _____
Full name of person before whom the declaration is made *Qualification / Occupation*

Of _____, _____, _____
Address *Town* *Postcode*

1. I saw the face of the declarant, **OR** I did not see the face of the declarant because he/she was wearing a face covering, but I am satisfied that he/she has a special justification for not removing it,

- AND**
 2. I have known the person for at least 12 months, **OR** I confirmed the person’s identity with _____

8 *Signature of person before whom the declaration is made* ⁸ _____, _____
Signature *JP Number*

Note 1 A person who intentionally makes a false statement in a statutory declaration is guilty of an offence, the punishment for which is imprisonment for a term of 4 years — see section 11 of the *Statutory Declarations Act 1959*.

Note 2 Chapter 2 of the *Criminal Code* applies to all offences against the *Statutory Declarations Act 1959* — see section 5A of the *Statutory Declarations Act 1959*.

ATTACHED

Please check that the following documentation is attached to your application:

- Certified copies*** of two (2) forms of identification
- Certified copy*** of documentation confirming work status (if not an Australian resident)
- Household Members Support Form from each adult household member (if applicable)
- Copy of rates notice, or other documentation as evidence of ownership of premises (if applicable)
- Landlord Consent (if applicable)
- Body Corporate consent (if applicable)
- Copy of Qualifications (if applicable)
- Copy of First Aid / Asthma management / Anaphylaxis management / CPR qualification (if available)
- Copy of relevant Child Protection training / qualifications (if applicable)
- Copy of relevant OHS training / qualifications (if applicable)

Thank you for your time in completing your expression of interest in becoming an Educator with Upper Hunter Family Day Care.

Please return this form, and any applicable documentation, to:

Upper Hunter Family Day Care
135 Liverpool Street, Scone
(PO Box 208, Scone NSW 2337)
uhfdc@upperhunter.nsw.gov.au