

## TEMPORARY RELIEF TEACHING APPLICATION FORM

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**PERSONAL INFORMATION**

**Application Date:** \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_ Postcode \_\_\_\_\_

Email address \_\_\_\_\_

Date and place of birth \_\_\_\_\_ Gender \_\_\_\_\_

Phone (Home) \_\_\_\_\_ Mobile \_\_\_\_\_

Emergency contact (Name) \_\_\_\_\_ Phone \_\_\_\_\_

Are you an Australian Citizen or a permanent resident of Australia or a New Zealand citizen who entered Australia on a current New Zealand passport? **Yes/No**

If not do you hold a valid visa with work entitlements **Yes/No**

*When considering your application the College may request evidence of your entitlement to work in Australia.*

**INVESTIGATOR COLLEGE HAS TWO CAMPUSES - VICTOR HARBOR AND GOOLWA**

**Do you wish to be considered for both Campuses? Yes / No [please circle]**

**If no, please indicate your preference: Victor Harbor / Goolwa**

**Please list year levels preferred for Relief Teaching** \_\_\_\_\_

**Which days are you available?** \_\_\_\_\_

**Please list subjects specialty for Secondary Teaching (if applicable)** \_\_\_\_\_

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ABN 85 128 635 270  
Principal, Mr Don Grimmett  
BEd, MEd

**Goolwa Campus**  
2 Glendale Gr, Goolwa SA 5214  
P: 08 8555 7500  
F: 08 8555 5733  
learn@investigator.sa.edu.au

**Victor Harbor Campus**  
Bacchus Rd, Victor Harbor SA 5211  
P: 08 8551 0900  
F: 08 8555 5733  
www.investigator.sa.edu.au

Teacher Registration Number \_\_\_\_\_ Expiry Date \_\_\_\_\_

Full Years of Experience \_\_\_\_\_ Current Pay Level \_\_\_\_\_

<b>PLEASE NOTE:</b> Copies of the following must be provided with your application. If they are not received we are unable to process your application.	<b>Enclosed</b>
<b>Teacher Registration Certificate &amp; Police Clearance</b>	
<b>First Aid Certificate</b>	
<b>Responding to Abuse &amp; Neglect Certificate</b>	
<b>Statutory Declaration</b>	

**Briefly Detail your qualifications:**

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**Briefly detail your experience, together with any additional information which you consider relevant:**

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**Thank you for completing this form**

**Please return with the enclosures listed on page 1 to:  
Email: [principal@investigator.sa.edu.au](mailto:principal@investigator.sa.edu.au)  
or mail to Mrs Alice Hendy, Principal's Personal Assistant  
Investigator College 2 Glendale Grove, Goolwa SA 5214.**

## Statutory Declaration

### South Australia

I, (full name) \_\_\_\_\_

of (address) \_\_\_\_\_

in the State of South Australia, (occupation) \_\_\_\_\_

do solemnly and sincerely declare that:

I have never:

1. Been charged with dishonesty or sexual offence or an offence against the person of a student or child or;
2. Been dismissed from any employment or had my services as a volunteer or consultant terminated on the grounds that I was involved in improper conduct with a student or child; or
3. Retired or resigned from any employment, consultancy or volunteering activity following allegations that I was involved in improper conduct with a student or child; or
4. Been advised by any employer or organisation that my name has been included on a list of those not to be employed or used as a volunteer or consultant on a child-related area of activity.

I am a fit and proper person to work closely with children.

And I make this solemn declaration conscientiously believing the same to be true, and by virtue of the provisions of the Oaths Act, as amended.

Declared and subscribed at \_\_\_\_\_

In the State of South Australia this \_\_\_\_\_ day of \_\_\_\_\_ 200\_\_

Signed \_\_\_\_\_

Before me \_\_\_\_\_

Title \_\_\_\_\_

**This declaration must be witnessed by a Justice of the Peace or a Commissioner for the taking of Affidavits.**