

## CASUAL TEACHING APPLICATION

WE USE CLASS COVER TO HIRE CASUALS - ARE YOU ON **CLASS COVER**?

**Yes**       **No**

IF YES, PLEASE MAKE SURE THE FOLLOWING DOCUMENTS ARE ATTACHED TO YOUR CLASS COVER ACCOUNT - **DO NOT** ATTACH THEM TO THIS FORM.

✓ **Child Protection Certificate** MyPL      ✓ **Emergency Care Certificate** e-Safety

✓ **Anaphylaxis Certificate** e-Safety      ✓ **WHS Induction** e-Safety

...../...../.....  
**EMPLOYEE NUMBER**      **DATE OF BIRTH**

.....  
TITLE      FIRST NAME      LAST NAME

.....  
ADDRESS      POSTCODE

.....      .....      .....  
MOBILE NO      HOME NO      WORK NO

.....  
EMAIL ADDRESS

DEPARTMENTS:

- |   |                                      |                                    |  |
|---|--------------------------------------|------------------------------------|--|
| <input type="radio"/> <b>Counsellor</b> | <input type="radio"/> <b>Dance</b>   | <input type="radio"/> <b>Drama</b> | <input type="radio"/> <b>English</b>     |
| <input type="radio"/> <b>HSIE</b>       | <input type="radio"/> <b>Maths</b>   | <input type="radio"/> <b>Music</b> | <input type="radio"/> <b>Primary</b>     |
| <input type="radio"/> <b>PDHPE</b>      | <input type="radio"/> <b>Science</b> | <input type="radio"/> <b>TAS</b>   | <input type="radio"/> <b>Visual Arts</b> |

**OFFICE USE ONLY:**

ONLY ATTACH TO THIS FORM A COPY OF YOUR ID, RESUME/COVER LETTER, IF PROVIDED

**Photo ID**       **ECPC Approval**       **ECPC WWC**      DATE: