

ABRAHAM KUYPER CHRISTIAN EDUCATION ASSOCIATION LTD TEACHING STAFF APPLICATION FORM

Return to: The Principal Kuyper Christian School	
294 Redbank Road KURRAJONG NS	W 2758
Name: (Surname)	(Christian names)
Address:	
Postcode:	Date of Birth:
Phone No:	Email address:
Religious Denomination:	Nationality:
Working with Children Identification	n Number:
Please enclose a copy of your birth ce	rtificate.
PERSONAL	
Marital status:	Name of Spouse:
Children:	Ages:
TEACHING REGISTRATION	
A New Scheme teacher is any teacher	· who:
	ach in NSW before 1 October 2004
, , , ,	teacher for the first time after 1 October 2004, or
years	ober 2004 to employment as a teacher following a period of at least five
NSW Institute of Teachers accreditation	n status:
Applicable to me, but I am yet	to apply
Application has been made –	I am waiting reply
Provisional Accreditation - Da	te of accreditation: (Enclose copy of letter)
Conditional Accreditation – Da	ate of accreditation: (Enclose copy of letter)
Professional Competence – D	ate of accreditation:(Enclose copy of letter)

NESA Teacher Accreditation Number:

CHRISTIAN CONVICTION AND EXPERIENCE		
Briefly describe your present local church affiliat	tion and any positions of responsibility you hold.	
Church Attending:		
Present minister's name:		
Address:		
Phone No:	Email:	
Please provide the names of two other persons concerning your application.	(other than your Minister) to whom reference can be made	
Name:	Name:	
Occupation:	Occupation:	
Address:	Address:	
Phone No:	Phone No:	
Describe your personal relationship with the Lor	d Jesus Christ.	
Have you read Kuyper's Creedal Statement YE	S/NO	
Do you concur YES / NO		
Set out briefly what you understand about Chris	tian Education.	
You may, if you wish, attach a more detailed sta	tement.	
Please include your CV and copies of releva	nt qualifications with this application form	
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STATUTORY DECLARATION		
l,	, hereby solemnly and sincerely declare that:	
1. The information contained in this application	ation is true and correct.	
I have never been charged with or conv	ricted of child abuse or any other crime other than as disclosed in	
this application. Please give details on a	•	
I acknowledge that:		
Any appointment is on condition that the	e information provided by me is true and correct.	
4. Checks may be made to verify any infor	rmation supplied and I give my permission for that to occur	
including, if considered appropriate, che		
And I make this declaration conscientiously beli-	eving it to be true and in accordance with provision of the OATHS	
Act of 1990.	·	
Signature:	Date:	
OFFICE USE ONLY		
Received application:		
Interviewed by:		

Date: