

SUITABILITY DECLARATION

PERSONAL PARTICULARS

Surname _____ Given Name _____
Date of Birth _____ Preferred Title (eg Mr, Mrs, Ms) _____
Address _____
Postcode _____
Phone No _____ Mobile _____
Email _____

POSITION DETAILS (leave blank if you are not being allocated to a position)

Name of Employer - *Diocese of Toowoomba Catholic Education Office (CEO)*
Name of School / CEO Team _____ Town _____
Position _____
Basis of Employment
 Full Time Part Time - Hours per week _____ Casual (Payment via Timesheets)

TEACHERS – SUITABILITY DECLARATION

1. I verify:
 - (a) I have not been convicted of a serious offence; and
 - (b) I agree to disclose any change to my (criminal) history to the employer.
2. I know no legal or moral impediment to my suitability to work with children.
3. I am aware that I need to provide to the Chair of the Selection Panel my current Queensland Teacher Registration Certificate and to provide a photocopy for the school and Catholic Education Office records.

Name (Printed)

Signature

Date

NON-TEACHERS – SUITABILITY DECLARATION

Please tick one box:

- I hold a **positive notice** to apply for / start / continue in child related employment as defined by the *Working with Children (Risk Management and Screening) Act 2000*.

Blue Card Number: _____ Expiry Date: _____

- Photocopy attached

or

- I hold a **negative notice** or I am **not eligible** to apply for / start / continue in child related employment as defined by the *Working with Children (Risk Management and Screening) Act 2000*.

or

- I do not possess a **prescribed notice** as defined by the *Working with Children (Risk Management and Screening) Act 2000*. I will obtain any such notice as required.

Name (Printed)

Signature

Date

NOTE: Please seek advice from the Public Safety Business Agency, Blue Card Services if you are unsure of your "eligibility" status via telephone on 1800 113 611 or by visiting www.bluecard.qld.gov.au