

DANDENONG COMMUNITY FAMILY DAY CARE



EXPRESSION OF INTEREST

Date: ____/____/____ Full Name: _____

Address: _____ Postcode: _____

Telephone (home): _____ Telephone (mobile): _____

Email address: _____ Occupation: _____

Date of birth: ____/____/____/ Country of birth: _____

Languages spoken: _____ Centrelink C.R.N. _____

Police check number: _____ Date of police check: ____/____/____

Working With Children Check number: _____ Exp: ____/____/____

Partner/Spouse Details

Name: _____ Date of birth: ____/____/____

Mobile phone number: _____ Occupation: _____

Police check number: _____ Date of police check: ____/____/____

Working With Children Check number: _____ Exp: ____/____/____

Child/Children's details (under 18 years old)

Name	Surname	Date of birth	Age	M/F
		/ /		
		/ /		
		/ /		

Other people residing in your home aged 18 years and over:

Name: _____ D.O.B. ____/____/____ Relationship to applicant: _____

Does this person have a current Police Check? YES NO

Police check number: _____ Date of police check: ____/____/____

Does this person have a current Working with Children Check? YES NO

Working With Children Check number: _____ Exp: ____/____/____

Employment History (including working for other FDC services)

Employer / FDC Scheme	Position held	Date of employment To - From	Reason for leaving

(We will attempt to contact your previous Family Day Care service for information on your time spent working with them)

Qualifications:

Name of qualification: _____

Name of institution qualification obtained: _____ Date completed: __/__/20

Are you currently a registered Family Day Care educator? YES NO

If yes, which service? _____

Your home:

Do you own your own home? YES NO

(If you are in a rental property, you will need **written permission** from your landlord to operate your Family Day Care business on the property).

What areas of your home, both inside and outside are available for play and sleep?

Do you have an enclosed back or front garden? YES NO

Do you have a shaded area in your back or front garden? YES NO

Do you have a pool, spa or water feature? YES NO

Do you have any pets? YES NO

Transport:

Do you hold a current Victorian driver's licence? YES NO

Make and model of car _____

Are you prepared to transport / walk children to and from pre-school / school YES NO

General:

What days are you prepared to work? ***Please circle the days***

Monday Tuesday Wednesday Thursday Friday Saturday Sunday

What times are you prepared to work? _____ am ***until*** _____ pm

What ages of children that you prefer to work with? ***Please circle the preferred ages***

Under 12 months 1 – 2 2 – 4 school children any age

Do you have good English communication skills? YES NO

Can you read English? YES NO Can you write English? YES NO

Are you prepared to provide a medical certificate, verifying that you are physically and emotionally able to care for Family Day Care children? YES NO

Technology:

Do you have a reliable internet connection YES NO

Do you have access to a computer, laptop, or iPad? YES NO

Do you know how to send and receive messages (including photos)? YES NO

I certify that I have completed this expression of interest and that the information contained in this form is true and correct.

Signed: _____ Date: _____

Referees:

Referee: (please make sure you inform your referee that you are planning to give out their details to obtain a reference).

Name: _____

Work Related (e.g., Scheme Coordinator, MCH Nurse, Teacher)

Name: _____

Occupation: _____

Phone: _____ Mobile: _____

**** *Please return this expression of interest together with your current resume to:***

deborah@dandenongcommunityfdc.com.au or 1 Anthony Street Dandenong North **

Dandenong Day Nursery Inc:

Dandenong Day Nursery, Kindergarten & Community Family Day Care

1 Anthony Street North Dandenong PO Box 2305 North Dandenong 3175

Phone: 97933499 Fax: 97934023

Email: deborah@dandenongcommunityfdc.com.au

PROHIBITION NOTICE DECLARATION FOR PROSPECTIVE EDUCATORS

- The declaration may be completed by any prospective staff member seeking employment or engagement with an education and care service
- This form is designed to support approved providers to ensure they do not engage or employ a person who is prohibited from working in an education and care service, in line with Section 188 of the Education and Care Service National Law
- Completed forms should be retained and stored by the approved provider to support compliance with Section 188 of Education and Care Service National Law
- **Please note this form does not need to be lodged with the regulatory authority**

PART A: Personal details

1. Please complete the following:

Title: First name: Last name:

Phone number: Mobile number:

Email: Date of birth: / /

Address:

Suburb: State: Postcode:

2. Please provide details of any former names you may be known by:

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.....

3. Are you currently subject to a prohibition notice under the Education and Care Service National

Law? Yes No

Please note that under section 187 of the Education and Care Services National Law, a person who is subject to a prohibition notice is not allowed to work for or be engaged by an education and care service or carry out any other related activity.

4. Are you currently prohibited or restricted from working with children under any other?

law? Yes No

Part B: Declaration

I, [insert full name of person signing the declaration] declare that:

1. The information provided on this form is true, complete, and correct
2. The approved provider or a representative of the approved provider is authorised to verify any information provided in this form
3. I am aware that under the Education and Care Services National Law penalties apply if false or misleading information is provided

Signature of person making the declaration:

Signed at: (place) on the: (date)

Signature of witness: Name of witness: