**Application Form**

**For Position Of**

**Deputy Principal**

**Student Wellbeing**

**at**

**MacKillop College**

**Personal Details**

|  |  |
| --- | --- |
| **Surname:** |  |
| **Given Name(s):** |  |
| **Home Address:** |  |
|  |  |
| **Home Telephone:** |  |
| **Mobile Phone:** |  |
| **Email Address:** |  |

**Current Appointment**

|  |  |
| --- | --- |
| **School Name:** |  |
| **School Address:** |  |
|  |  |
| **School Telephone:** |  |
| **Current Position:** |  |

**Experience in Education**

*Please indicate your experience in education:*

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| --- | --- | --- | --- | --- |
| **School** | **Position** | **Dates/Years** | **Full Time/****Part Time** | **Principal** |
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**Experience in Educational Leadership**

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| **Leadership Position** | **Dates/Year(s)** |
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| Have you had any interruption in continuous full time teaching or educational employment? |  |

If **Yes**, please give details

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| --- | --- |
| **Year** | **Details** |
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**Other Work Experience** (Outside Teaching, If Applicable)

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| **Position** | **Organization** | **Dates/Years** |
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**Parish / Church Involvement**

List the parishes in which you have resided in the last 8 years and indicate your involvement in parish /church life.

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| **Parish** | **Involvement** |
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**Professional Associations**

Please list any professional associations to which you belong or have belonged in the past, and indicate any position held and your involvement:

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| **Association** | **Position Held/Involvement** |
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**Community and Recreational Involvement**

Please list any community and/or recreational groups to which you belong or have belonged in the past and indicate your involvement.

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| **Community /Recreational Group** | **Type Of Involvement** |
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**Initial Teaching Qualification**

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| --- | --- |
| **Teacher Training Institute:**  |  |
| **Initial Qualification Gained:** |  |
| **Date of Completion:**  |  |
| **Victorian Institute of Teaching Registration No:**  |  |

**CECV Accreditation**

|  |  |
| --- | --- |
| **Training Institution:**  |  |
| **Certificate Number:**  |  |
| **Date:**  |  |

**Further Teaching / Education / Leadership Qualifications**

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| --- | --- | --- |
| **Institution** | **Qualification Gained** | **Date Of Completion** |
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**Professional Development activities undertaken in the last two years and relevant to this Application**

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| **Institution** | **Professional Development Activity** | **Date(s)** |
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Approval needs to be sought from referees prior to their nomination

**Referees**

Names and addresses of persons who have consented to act as referees and who are competent to comment on your educational ability, your current professional position and your suitability in the role as Deputy Principal.

**Current Principal or Employer**

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| --- |
| **Name**:  |
| **Position**:  |
| **School / Institution**:  |
| **Address**:  | **Postcode**:  |
| **Telephone**:  | **Mobile**:  |

**Professional Referee**

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| --- |
| **Name**:  |
| **Position**:  |
| **School / Institution**: |
| **Telephone**:  | **Mobile**:  |

**Professional Referee**

|  |
| --- |
| **Name**:  |
| **Position**:  |
| **School / Institution**: |
| **Telephone**:  | **Mobile**:  |