

	<p>Department of Education & Early Childhood Development Victorian School of Languages <u>Teacher (Instructor)</u> <u>Application</u></p>	<p>Victorian School of Languages PO Box 1172, Thornbury 3071 Tel: (03) 9474 0500 Fax: (03) 9416 9899 Website: www.vsl.vic.edu.au Email: vsl@vsl.vic.edu.au</p>
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Instructions to Applicants

Before completing the attached form read the following instructions carefully.

You should also read the 2019 VSL Languages Circular.

A. DOCUMENTATION REQUIRED FROM ALL APPLICANTS

Evidence of Date of Birth

Copies of one of the following: birth certificate, extract of birth entry, passport, certificate of naturalisation, certificate of citizenship.

Evidence of Change of Name

If your name is not the same as that on your birth certificate you need to provide evidence of the change of name.

Evidence of Teacher Registration

The Victorian School of Languages seeks to appoint teachers with professional registration from the Victorian Institute of Teaching which includes a police record check. For some languages, a Working With Children Check is the minimum requirement. If you do not possess three years of tertiary language qualifications, two references from suitably qualified persons should be included to attest to your teaching skills and suitability to teach the designated language.

Evidence of Academic and Teacher Training Qualifications

- copies of academic records (official transcripts) of all subjects completed in each qualification obtained
- copies of relevant certificates, diplomas or degrees issued by tertiary institutions
- copies of any other qualifications in the language

Evidence of Permanent Residency Status

If you are not an Australian citizen, include a copy of the relevant pages from your passport showing a stamp which confirms your right to permanent residence or permission to work in Australia. Your name must appear on the copy. No person without a valid Visa can be employed by the school.

NB. All documentation supplied must be certified by an appropriate person (see next page). Do **not** supply original documents.

B. PRE-EMPLOYMENT HEALTH DECLARATION

All new staff must complete the Pre-Employment Health Declaration form (attached) and return this to the VSL.

C. Child Safe Standards

The Victorian School of Languages is committed to child safety and has zero tolerance of child abuse. All staff are required to be familiar with and implement the:

- Child Safe Standards.
- Statement of Commitment to Child Safety.
- Child Safety Code of Conduct.

D. ADDITIONAL INFORMATION

You may be required for an interview before you can be appointed. The key selection criteria (attached) is indicative of what is considered in assessing your suitability for a position.

This information will be entered on a database. Please notify the Head Office of any changes in your details, especially your daytime contact and mobile telephone numbers.

The application will be kept for two years. You will need to reapply after that time.

E. CERTIFICATION OF DOCUMENTS

The following persons can certify copies of documents required to support your application and witness the statutory declaration for the pre-employment health declaration.

- a justice of the peace or a bail justice
- a public notary
- an Australian lawyer (within the meaning of the *Legal Profession Act 2004*)
- a clerk to an Australian lawyer
- the prothonotary or a deputy prothonotary of the Supreme Court, the registrar or the deputy registrar of the County Court, the principal registrar of the Magistrates' Court or the registrar or the deputy registrar of the Magistrates' Court
- the registrar of probates and the assistant registrar of probates
- the associate to a judge of the Supreme Court or of the County Court
- the secretary of a master of the Supreme Court or of the County Court
- a person registered as a patent attorney under Chapter 20 of the *Patents Act 1990* of the Commonwealth
- a member of the police force
- the sheriff or deputy sheriff
- a member or a former member of either House of the Parliament of Victoria
- a member or a former member of either House of the Parliament of the Commonwealth
- a councillor of a municipality
- a senior officer of a council as defined in the *Local Government Act 1989*
- a registered medical practitioner within the meaning of the *Medical Practice Act 1994*
- a registered dentist within the meaning of the *Dental Practice Act 1999*
- a veterinary practitioner
- a pharmacist
- a principal in the (State) teaching service
- the manager of a bank
- a member of the Institute of Chartered Accountants in Australia or CPA or the National Institute of Accountants
- the secretary of a building society
- a minister of religion authorised to celebrate marriages (not a civil celebrant)
- a person employed under Part 3 of the *Public Administration Act 2004* with a classification that is prescribed as a classification for statutory declarations, or who holds office in a statutory authority with such a classification
- a fellow of the Institute of Legal Executives (Victoria).

F. APPLICATION

Complete all particulars of your application in BLOCK LETTERS and return to:

**The Principal
Victorian School of Languages
PO Box 1172
Thornbury 3071**

Office Use Only

Date issued ___/___/___

Category _____

Comments _____

Have you previously taught with the VSL? Yes No

Are you currently employed By the DEECD? Yes No

**Department of Education & Early Childhood Development (DEECD)
VICTORIAN SCHOOL OF LANGUAGES
Application Form - Teacher (Instructor) - 2019**

PLEASE NOTE: Complete **all** particulars in **BLOCK LETTERS** and return to:
The Principal, Victorian School of Languages, PO Box 1172, Thornbury Vic 3071

**Please read the instruction sheet
before completing this form.
Failure to provide required information
could result in the return of your application.**

Title (Mr, Mrs, Ms) _____ Surname _____ Given Names _____

Home Address _____

_____ Postcode _____

Home Telephone _____ Mobile _____ Date of Birth _____

Email address _____

Place of Weekly Employment _____

Address _____ Work Tel: _____

Email address _____

Language(s) Offered 1. _____ Year Levels Offered: 1-3, 4-6, 7-8, 9-10, 11-12

2. _____ Year Levels Offered: 1-3, 4-6, 7-8, 9-10, 11-12
(Circle the preferred year levels)

Centres applied for in priority order (see VSL Languages Circular)

1.	2.	3.
4.	5.	6.

For Office Use Only

Notice of appointment	Centre	Language & Class	Centre Notified

Transferred from: _____ To: _____ Lang/Class _____

Resigned: _____

A. TEACHER REGISTRATION (Attach evidence)
VICTORIAN INSTITUTE OF TEACHING Registration No. _____ **OR**
WORKING WITH CHILDREN CHECK No. _____

B. QUALIFICATIONS (Attach a transcript of your academic record)

Tertiary Qualifications (eg. Bachelor of Arts) Year of Completion _____

Name of Institution _____ Country where study took place _____

Name of degree/diploma _____

Teacher Training Qualifications (eg. Diploma of Education or Bachelor of Education or Master of Teaching)

Name of Institution _____ Country where study took place _____

Name of degree/diploma _____

Language teaching methodology Yes No Year of Completion _____

Language other than English Qualifications

Number of years of formal and successful tertiary studies in the language(s) offered _____

Language(s) studied _____

Additional qualifications or accreditation Year of Completion _____

Details _____

Name of Institution _____ Country where study took place _____

C. PREVIOUS TEACHING EXPERIENCE

Name and Address of School	Start Date	Finish Date	Year(s) of experience teaching language(s)

D. RESUME

Please attach a current document that addresses the key selection criteria which are listed on the last page of this application form. Resume attached Yes No

E. DECLARATION

I give the VSL permission to give my name and telephone number to other schools seeking to employ a language teacher. YES NO

I have no pre-existing illness or injury that would interfere with my capacity to undertake the duties of the position. In addition, I will inform the school if this situation changes during the year, or if I go on personal leave from another employer.

I declare that I will implement the VSL "Child Safety Code of Conduct" and that I have not been charged with any offences involving children.

I _____ (applicant's name) declare that the contents of the above application are true and correct.

Signature _____ Date ___/___/___

Signature of witness _____ Date ___/___/___

Checklist (*All of these copies must be certified)

*Attach copy of teacher registration by the Victorian Institute of Teaching

*Attach copy of Working With Children Check (if not VIT registered)

*Attach copies of your qualifications

*If you do not have teacher qualifications, provide two references

*Attach completed Pre-employment Health Declaration Form

Victorian School of Languages

Pre-employment Health Declaration

Employment with the Department of Education and Training (DET) is conditional on the applicant being a fit and proper person and fully able to perform the inherent requirements of the position. When completing the pre-employment health declaration it must be in full knowledge of the position as outlined in the duty statement, and selection criteria. Read the documents carefully and discuss any queries that you may have prior to completing the form with the respective principal or manager.

The primary purpose of this pre-employment health declaration is to assist DET to ensure that no person is placed in an environment or given tasks that will result in physical or mental harm. It is not the intention of the pre-employment health declaration to deny a person employment solely because of disability or illness. The pre-employment health declaration does enable, where applicable, appropriate and reasonable action to be taken by DET to meet the provisions of Sections 82(7) and (8) of the *Accident Compensation Act 1985* and Section 21 of the *Occupational Health and Safety Act 2004*.

Section 82(7) and (8) of the *Accident Compensation Act 1985*, requires disclosure to your employer of any pre-existing injuries or disease that you have suffered, or existing injuries or disease that you continue to suffer of which you are aware and could reasonably be expected to foresee, and could be affected by the nature of the proposed employment referred to above.

Section 21 of the *Occupational Health and Safety Act 2004*, states that an employer shall provide and maintain, so far as practicable, for employees a working environment that is safe and without risks.

Failure to make a disclosure, or the making of a false or misleading disclosure, may disentitle you to compensation pursuant to the *Accident Compensation Act 1985* should you suffer any recurrence, aggravation, acceleration, exacerbation or deterioration of a pre-existing injury or disease arising from employment with the Department of Education and Training. DET may rely upon any failure to disclose in accordance with the provisions of the *Accident Compensation Act 1985* as grounds for denying compensation.

Privacy Notice: The collection and processing of this information is in accordance with the *Occupational Health and Safety Act 2004*, and the *Accident Compensation Act 1985*.

The completed pre-employment health declaration form will be retained on your personal file. Where employment is not taken up, for whatever reason, all documents relating to your application will be retained for six months after the finalisation of any appointment appeal and then destroyed.

DET may disclose some of your personal information, as applicable, to an independent medical examiner should DET require an assessment of your suitability for employment and fitness for duty. Your health declaration may be also disclosed to the Department's WorkCover insurer should you submit a WorkCover claim for compensation.

You are able to request access to the personal information that we hold about you, and request that it be corrected by contacting your manager, school, or Schools HR Services on 1800 641 943 directly or the Freedom Of Information (FOI) Unit on 9637 2670.

Information about the Department's privacy policy can be found at <http://www.education.vic.gov.au/about/deptpolicies/informationprivacy.htm>

HEALTH DECLARATION

Q1. Are you aware of any circumstances regarding your health or capacity to work that would interfere with your ability to perform the duties of the position?

In answering this question Yes or No you are also covering factors such as: existing or exposure to infectious diseases, taking of medication/treatment on a regular basis (daily, weekly, monthly)

NO[] YES[], if yes, please provide details.

Q2. Do you have an existing injury or condition or pre-existing injury or condition?

Existing is a condition for which treatment is still being received. Pre-existing is where an injury or condition/s is present but treatment is not required. If yes please provide details of the injury or condition(s).

NO[] YES[], if yes, please provide details.

Q3. Have you ever worked with any substances or in any conditions which may have been hazardous to your health (e.g. asbestos exposure, toxic chemicals, stressful or noisy environments) and for which you need a modified workplace?

NO[] YES[], if yes, please provide details.

STATUTORY DECLARATION

I, _____ of _____

(Applicant's Name)

(Applicant's Address)

do solemnly and sincerely declare that the contents of this form are true and correct in every particular, and make this solemn declaration conscientiously believing the same to be true and by virtue of the provisions of an Act of the Parliament of Victoria rendering persons making a false declaration to be punishable for wilful and corrupt perjury.

The information stated is true and complete to the best of my knowledge and no information concerning my past or present state of health has been withheld. I hereby agree to undergo a health assessment by a medical practitioner if deemed necessary by the Department of Education and Training.

I am aware that I may be required to undergo a hearing test. I will be advised that if a work related noise induced hearing deficit is detected that a compensation claim should be lodged against the relevant past employer. I am aware that the record of audiometry will be held in my file. I am aware that I will be asked to meet the cost of these examinations/reports.

I understand that any wilfully incorrect or misleading answer or material omission which relates to any of the questions before mentioned may make me ineligible for employment, or if employed, liable to dismissal. I understand that this pre-employment health declaration may form part of my file.

Declared at _____ before me

(location)

(Signature of Witness)

In the State of Victoria this _____ day of _____,
20____

Status of the person witnessing the declaration:

(Refer to Instructions to Applicants, section D, for list of appropriate persons)

Applicant's signature _____

Victorian School of Languages

Key Selection Criteria for Language Instructors

ESSENTIAL

1. **Demonstrated competence in the target language and experience in teaching a language.**
2. **Working With Children Check or VIT registration (that includes a Police Check).**

DESIRED (all criteria carry equal weighting)

3. **A Bachelor Degree with a Language major, or equivalent, and Teacher Training (Diploma of Education, or Bachelor of Education or Master of Teaching).**
4. **Demonstrated understanding of the (new) Victorian Curriculum (F-10), VCE and other educational policies and initiatives such as Assessment and Reporting and ICT**
5. **Demonstrated ability to motivate students to continue learning and to establish a rapport that maximises class attendance.**
6. **Ability to provide effective teaching and learning experiences that cater for diverse student learning needs and multiple level classes, as demonstrated by student achievement.**
7. **Ability to assess and monitor student achievement and provide adequate feedback to students and parents.**
8. **Sound communication and interpersonal skills and ability to contribute cooperatively to a team in a setting which respects multiculturalism and diversity.**
9. **Capacity to reflect on practice and a demonstrated commitment to professional development.**
10. **Demonstrated commitment to ongoing professional development as per the VIT standards of professional practice.**
11. **Ability to implement “Child Safe Standards” practices.**