



Nature Alliance Family Day Care Service

Application for Registration for Educator Assistant



Name of Educator that you will be assisting _____

This form is to be completed to apply for Registration as an Educator Assistant with Nature Alliance Family Day Care Service.

Attach your
Passport
photo here

Completing this document does not guarantee your acceptance as an Educator Assistant with Nature Alliance Family Day Care Service. Cost of registration will be \$110.00 non-refundable.

Personal details		
Given names:	Surname:	
Address:		
Town / Suburb:	State:	Postcode:
Centrelink Customer Reference Number (CRN):		
Mobile:	Home phone:	
Email:		
Date of birth:	Sex: F <input type="checkbox"/> M <input type="checkbox"/>	
Country of birth:	Nationality:	
Language(s) spoken (other than English):		
Next of Kin Details (in emergency)		
Given names:	Surname:	
Mobile:	Home Phone:	
Email:		

Medical Requirement

You are required to make a statement stipulating that you are physically and mentally able to look after a group of children 0 – 12 years and the effect of any medication which may affect your ability to care for young children. Please answer the following questions:

Are you taking any medication that could affect your ability to make quick judgments? Yes No

Are you suffering from any condition that would affect your mobility? Yes No

In your opinion, are you physically, emotionally and mentally able to care for young Children. Yes No

Are you suffering or being treated for any alcohol or substance related illness? Yes No

Have you ever engaged in any alcohol or substance abuse? If YES, please attach a Statutory Declaration regarding any alcohol or substance abuse and your current lifestyle. Yes No

Are you fully aware of the recommended immunizations for adults working with children? Yes No

Do you have any further information or considerations that you would like to comment on? Yes No

Qualifications

Do you have any formal training qualifications? Yes No

Please attach copies of any Childcare or equivalent qualifications.

The following evidence of training is required to support your application. (This can be attached or forwarded at a later date.) Your application will not be approved until all documents are received.

Employment history

A current Curriculum Vitae is required with your application. Attached: Yes No

Evidence to support your Application	Doc Attached	Doc Forwarded
National Police Certificate (not more than 6 month old at time of application)		
Working with Children Card		
Apply first Aid in Child Care – HLTAID004		
Child Protection		
I'm Alert – Safe Food Handling		
Proof that you are over the age of 18 years		

Fit and Proper Requirements

Have you lived or worked outside Australia anytime within the past three years? Yes No

If Yes, please provide an overseas criminal history statement.

Have you ever been subjected to a formal disciplinary proceeding or action under any education or child care law in any jurisdiction? Yes No

If Yes, please attach a statutory declaration regarding the disciplinary proceeding including the date and type of action or proceeding and the outcome.

Transporting Enrolled Children

If you will be using your vehicle to transport enrolled children please provide the following details

Type of Vehicle: _____ Number of seats: _____ Number of child car restraints: _____

Do you have Standard or Family Third Party Insurance cover? Yes No

If you will be transporting children, please attach a Copy of your Drivers' license.

Personal references

Please provide the names of two referees (one who has experience in children's service e.g. childcare worker, teacher or similar, as well as someone who you have worked with in a paid or unpaid capacity – but not related).

Please let these people know they will be contacted by Nature Alliance Family Day Care in regards to your application.

Referee 1		
Surname:	Given names:	
Address:		
Town / Suburb:	State:	Postcode:
Mobile:	Home phone:	
Occupation:	Years known:	

Referee 2		
Surname:	Given names:	
Address:		
Town / Suburb:	State:	Postcode:
Mobile:	Home phone:	
Occupation:	Years known:	

Documentation to be forwarded with application

TO:
Nature Alliance Family Day Care Service
PO Box 505, Dunsborough WA 6281
or
Email : info@naturealliancefdc.com.au

Registration fee \$110.00 payable to: BSB 016580, Account Number: 209837864.

Declaration

I _____ certify that all information is accurate at the time of completing this form and agree to advise of any changes as they occur in the future. I understand this does not guarantee membership to become an Educator with Nature Alliance Family Day Care Service.

Signed: _____ Date: _____

<i>Office Use only:</i>	<i>Documents received</i>	<i>Date</i>	<i>Actioned by</i>
	<i>Educator File noted</i>	<i>Date</i>	<i>Actioned by</i>
	<i>Notified of Approval</i>	<i>Date</i>	<i>Actioned by</i>

