

CHILD WISE FAMILY DAY CARE SCHEME



Educator Application Form

Family Name	First Name
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Address	Postcode
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Are you aged 18 years or over? <input type="checkbox"/> Yes <input type="checkbox"/> No
(For Health & Safety reasons and the well being children in care, any carer must be at least 18 years of age)

Telephone:

Mobile:

D.O.B _____ **Educator email** _____

Educator CRN _____

If your home is rented, do you have the owner's permission to operate Family Day Care? Yes No

Is your home a smoke free environment? Yes No

Is any other business operated from your home? Yes No

If yes, give details: _____

Note: We need your email to send your payslips.

Country of origin:	What languages other than English do you
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Please give details of all other adults over 18 years of age living in your home.
(Each person aged 17 years or older residing at the Family Day Care home will need to consent to WWC Card.)

Name	Relationship	Date of birth	Contact phone

Which of these people, if any, would be at home during the provision of Family Day Care?

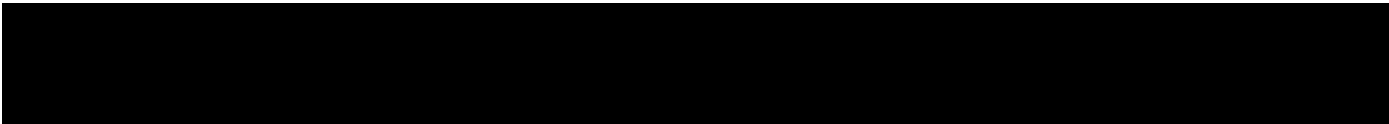
Please give details of children under 18 residing your premise.

Name	Relationship	Date of birth	Contact phone

Details of next of kin for emergency purposes:

Name: _____

Relationship: _____ Phone: _____



REFEREES / EDUCATOR SUITABILITY

Please provide details of two referees who:

- Know about your ability to work with young children
- You have worked for or with, and
- Can discuss your personality – one personal referee.

1. Name: _____
Telephone or other contacts details: _____
Organisation: _____
Position held: _____
Relationship to applicant: _____

2. Name: _____
Telephone or other contacts details: _____
Organisation: _____
Position held: _____
Relationship to applicant: _____

3. Name: _____
Telephone or other contacts details: _____
Organisation: _____
Position held: _____
Relationship to applicant: _____

Please give details of your previous work experience:

From	To	Employer	Job description

Please fill in the hours and days you will be available to care for children:

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
AM							
PM							

(It is preferred that you are available to work 4 to 5 days per week we do not encourage our educators to work more than 6 days per week)



Please provide details of your qualifications, and attach copies of certificates.

Briefly outline the skills you bring to Bright Futures Family Day Care Scheme.

Have you worked in family day care before? If so how long?

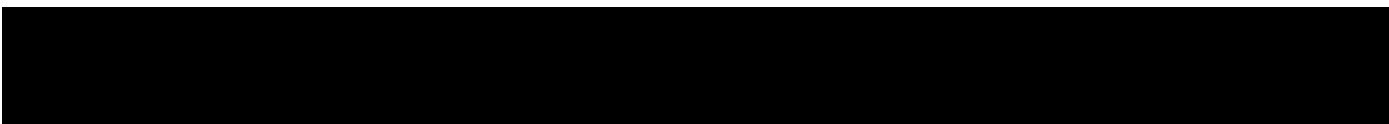
Are you prepared to transport children to Playgroups, Pre School or School or sporting activities?

Yes No

Do you have any experience other than listed above in caring for children with special needs?

Yes No

If yes, please give details:



FAMILY DAY CARE IN YOUR HOME

Although our primary concern is to register suitable Educators, Family Day Care does involve other persons living in your home.

This may put restrictions on all members of the household (eg like most working parents, your children may be restricted about having friends visit after school). Partners and other adults may have activities not conducive to positive child care such as inappropriate television, video programs, smoking, consumption of alcohol or inappropriate language used by adults and older children.

Have you discussed Family Day Care with other members of your household? Yes No

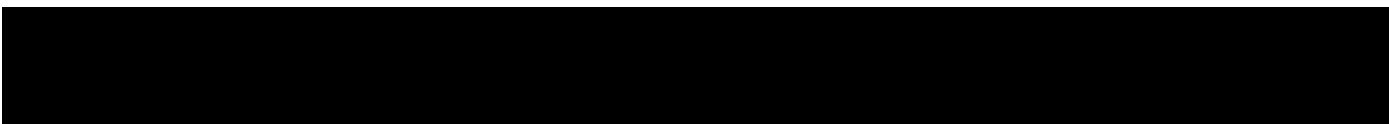
What are the attitudes/feelings of members of your household to you undertaking Family Day Care? _____

Have you, or any members of your household, in the past 10 years served any part of sentence, or imprisonment, or been convicted of any offence, or have any charges currently pending? Yes No

Please comment:

Any member of your family living with you, have a medical condition that will detract you from the time you spend with the children in your care? Yes No

If yes, please provide details (doctors certificate may be required):



Declaration:

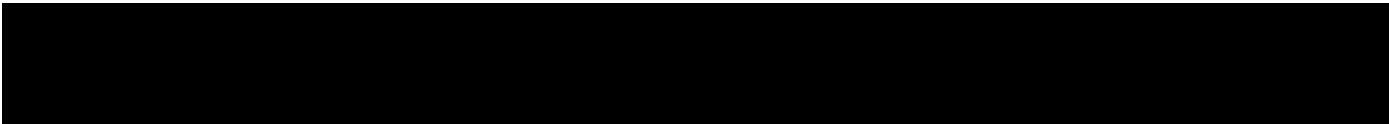
I _____ declare the above information is true and correct to the best of my knowledge. I consent to referee checks that may be necessary to support this application.

Signature

Date

Privacy Notification

The personal information requested is being collected by Child Wise Family Day Care Scheme for application to become a Family /Day Care Educator.



Educator Bank Account

Given Name: _____

Surname: _____

Educator CRN: _____

ABN

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Bank Details

Name of Bank: _____ Name on your Account: _____

Address of Bank _____ Suburb of Bank _____

B.S.B Number _____

Account Number _____

Tax File Number _____