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Created: April 2014

**Community Liaison Officer (CLO) Registration of Interest – Teaching and Learning Services**

Please return completed Registration Form and Curriculum Vitae (1500 word limit) to the Numeracy and Literacy Unit.

Email: rosie.daloia@sa.gov.au Phone: (08) 8226 2756 Fax: 8226 3830

**SECTION 1**

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| **PERSONAL DETAILS** |
| Family Name: Click here to enter text. | Given Name:Click here to enter text. | Title: Click here to enter text. |
| Work Phone: Click here to enter text. | Mobile:Click here to enter text. | Email:Click here to enter text. |
| Postal Address:Click here to enter text. |

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| **CURRENT EMPLOYMENT DETAILS** |
| DECD ID NUMBER:Click here to enter text. | Worksite:Click here to enter text. |
| Current Position:Click here to enter text. | Classification:Click here to enter text. |
| Employment Category: | Ongoing [ ]  | Contract [ ]  | Fulltime [ ]  | Part Time [ ]  |

**SECTION 2**

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| **SKILLS/EXPERIENCE/KNOWLEDGE** |
| Please indicate your area(s) of skill/experience/knowledge: |
| [ ]  Community Liaison Officer [ ]  Bilingual SSO [ ]  Early Childhood Bilingual Worker |
| [ ]  Australian Curriculum: [ ]  Primary [ ]  Secondary |
| [ ]  Early Years Learning Framework  | [ ]  SACE | [ ]  Vocational Education |
| [ ]  English as an Additional Language |
| [ ]  Student Wellbeing |
| Availability for Appointment to TLS [ ]  Full Time [ ]  Part Time |

**SECTION 3**

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| **REFEREES** (Please note that your referees may be contacted at any time after receipt of the application) |
| Name: Click here to enter text. | Name:Click here to enter text. |
| Position Held:Click here to enter text. | Position Held:Click here to enter text. |
| Phone:Click here to enter text. | Phone:Click here to enter text. |

In 300 words or less, provide evidence of your expertise in the following areas

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| **DEMONSTRATED ABILITY TO WORK EFFECTIVELY WITH A DIVERSE RANGE OF PERSONNEL, STUDENTS, PARENTS AND COMMUNITY MEMBERS** |
| Click here to enter text. |
| **HIGH LEVEL ORAL AND WRITTEN COMMUNICATION SKILLS**  |
| Click here to enter text. |

**SECTION 4**

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| **OFFICE USE ONLY** |
| Date received: | Valid Until: |
| Checked by: | Date: |
| Checklist: Valeo Added to Electronic Register Confirmation Email Sent |
| Notes: |

**This information will only be used for the purpose of expression of interest. Thank you for your application.**