2018 Employable Ancillary Register Application Guide for Private Music Instructors

Information Privacy Notice

The department will use the information you provide to support workforce planning, respond to Ministerial requests for information, and to meet statutory reporting requirements. The information you provide will be incorporated into the departments Human Resource Management System and will be accessed by relevant department personnel for the purposes of workforce analysis and planning, human resource service provision and reporting to meet Federal and State government requirements. Reporting will be in the form of statistics, and will not provide specific information about individuals.

All information will be handled in accordance with the Information Privacy Principles (Department of Premier and Cabinet Circular no.12).

of Premier and Cabinet Circular no.12).
() Accept
() Not Accept
Mandatory Requirements
Have you read the eligibility criteria for this position?
() Yes
() No
Are you eligible to apply for this position?
() Yes
() No
Notice:
By continuing with this application, you acknowledge and accept the Terms and Conditions and Privacy Policy Statements that apply to this web site.
Please enter your email address:
Congratulations! You meet the minimum criteria to proceed.
Click on proceed or login to continue your application.

1. Applicant Details

Title () Mr () Ms () Mrs () Dr ()Professor () Miss
First Name (as per birth certificate) Second Name Preferred Name Surname Previous Surname
Date of Birth
Gender () Male () Female
DECD Employee ID (if known) Postal Address: No. & Street or PO Box Suburb/Town State Post Code Country
Is your Residential Address the same as your Postal Address? () Yes () No
Residential Address: No. & Street

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All applicants details must be provided to proceed through the application

Mobile Number	
Are you of Aboriginal and/or Torres Strait Islander origin? () A - Aboriginal () B - Torres Strait Islander () C - Aboriginal and Torres Strait Islander () E - Not Aboriginal or Torres Strait Islander	All applicants details must be provided to proceed through the application
Email	

2. Supporting Documentation

My Attachments

Please attach your Evidence of Name Change (if applicable). Please upload one attachment only.

Please attach your Confirmation of Aboriginality Certificate (if required).

Please upload one attachment only.

If you are of Australian Aboriginal and/or Torres

Strait Islander origin, please refer to help for further information.

Attached evidence of your Name Change (if applicable)

Attach your Confirmation of Aboriginality Certificate (if applicable)

3. Employment Type

Please select the type of employment you are seeking (you can select more than one option by holding the Ctrl key down on your keyboard and clicking with your mouse to highlight):

Please click here for help.

- () School Services Officer (SSO)
- () Government Services Employee (GSE)
- () Early Childhood Worker (ECW)
- () Hourly Paid Instructor (HPI)
- () Aboriginal Community Education Officer (ACEO)

To register as a Private Music Instructor, select the 'HPI' option

Please note: Although you may not be applying to become a HPI, please select this option until this online form is updated to include 'PMI'

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Hours Sought

NOTE: Please enter part hours as decimals.

For example, enter 18.75 for 18 hours and 45 minutes.

Please click here for help.

Minimum Hours Per Week:

Maximum Hours Per Week:

Enter the minimum and maximum number of hours per week you are intending to instruct

4. Major Function

If you are seeking only Hourly Paid Instructor (HPI) employment, you do not need to select any Major Functions or Skills. If you are seeking only Aboriginal Community Education Officer (ACEO) employment, you do not need to enter any skills.

If required, please enter at least one major function applicable to the employment you are seeking. If you select Bilingual, please also enter language(s) in the "other expertise" section below with an Other Expertise of "LN - Language".

Please click here for help.

Major Function Not applicable

Skill

Please enter any skills if applicable:

Skill

Not applicable

Additional Skills (Other Expertise)

Please enter any other expertise if applicable:

Additional Skills.

Description.

ADD REMOVE

intending to instruct

Select the 'MT – Musical
Instruments' option

Type the name of your instrument

Add any other instruments as required

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List the instrument(s) you are

5. Location Preference

Please indicate your preferences by individual sites or broad geographic localities. You will be given the option later to exclude certain types of site and/or individual sites.

Please click here for help

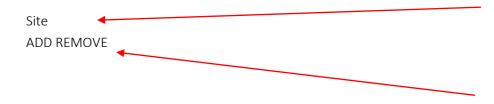
Select the 'individual sites' option

() Individual Sites

6. Site Preference

Please list your preferred sites in order of preference:

Please click here for help



Select and add the 'site(s)' where you are intending to instruct.

If sites are not confirmed select your intended preferences.

Add any other sites as required

7. Employment History

Your employment history should include all periods of employment, unemployment, tertiary study and schooling for a continuous period over the last 5 years.

Please click here for help

From (Approx Date)
To (Approx Date)
Employer/Activity
Location
Details



Please list any relevant music instruction history for the last 5 years as separate entries.

8. Qualifications

If your qualification is not listed, please select the closest match. PLEASE NOTE: If you have been or are currently employed with DECD, please ensure your qualification details match what was previously provided.

Please click here for help

Qualification

Awarding Institution

Start Date (dd \ mm \ yyyy)

Completion Date (dd \ mm \ yyyy)

Duration (length of tertiary study)

Major Field of Study

ADD REMOVE

Enter details relating to your education and/or music qualifications

Add any other qualifications as required

9. Referee Details

Please nominate at least 2 and up to 4 referees below

Please click here for help

Name

Type

Position and Location

Work Phone

Other Phone

Provide the details of two music or education related referees

10. Employment Unavailability

Please enter any periods for which you will be unavailable for employment:

From (dd \ mm \ yyyy)
To (dd \ mm \ yyyy)

Details

Skip this step if not applicable

Other Information

Please enter any other information relevant to your application.

Please limit your response to no more than 250 characters.

Please click here for help

Skip this step if not applicable

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11. Certificates and Registration

Please provide details of and upload a copy of updated or new required certificates only. Previously entered certificates and registration are already recorded and do not need to be attached again.

Please click here for help

Please provide details of your Relevant History Screening Letter (if you are a teacher you may provide details of your Teacher registration below instead). PLEASE NOTE: The NATIONAL POLICE CERTIFICATE purchasable from Police Stations is NOT ACCEPTABLE.

Type

- () To be advised
- () DCSI Communities Social Inclusion Child-Related Employment Check

Letter Date (dd \ mm \ yyyy)

Please attach your Screening Letter:

As an alternative to a Relevant History Screening, if you are a teacher seeking employment as an ancillary you can provide details of your Teacher Registration Renewal (renewed registration certificate).

Teacher Registration Class:

- () To be Advised
- () TRFU Full Registration
- () TRPR Provisional Registration
- () TRRS Restricted registration

Teacher Registration Number:

Teacher Registration Expiry Date: (dd \ mm \ yyyy)
Please attach your Teacher Registration Certificate:

Please provide details of your Responding to Abuse and

Neglect Training or updated Certificate.

Responding to Abuse and Neglect Issue Date: (dd \ mm \ yyyy)

Please attach your Responding to Abuse and Neglect Training Certificate:

Select DCSI Child-Related Employment Check

Enter the date your current DCSI Child related clearance was issued

Attach your current DCSI Child related clearance

If applicable please complete and attached your current Teachers Registration and provide your TRB registration number

Enter the date your current RAN-EC was issued

Attach your current RAN-EC Certificate

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Please provide details of your First Aid Certificate (OPTIONAL) First Aid Class: () To be Advised () BELS - Basic Emergency Life Support This is not a requirement to be a () PEFA - Provide Emergency First Aid Private Music Instructor. (Education & Care Set) You are welcome to attach any () PRFA - Provide First Aid (Previously certificates relating to the below Applied and Senior) qualifications () RECT - Receipt for enrolment in approved First Aid course First Aid Issue Date/Enrolment Date: (dd \ mm \ yyyy) Please attach your First Aid Certificate: Please provide details of your Anaphylaxis Training Certificate: Anaphylaxis Training Issue Date: (dd \ mm \ yyyy) Please attach your Anaphylaxis Training Certificate:

Please provide details of your Asthma Training Certificate:

Asthma Training Issue Date: (dd \ mm \ yyyy) Please attach your Asthma Training Certificate:

12. Employment Declaration

In order to be considered for employment in any capacity in the Department for Education and Child Development (DECD), you must complete all components of this Declaration, including by providing additional, supporting information and documentation where a yes response has been recorded. You will not be considered for employment unless you complete the Declaration and provide comprehensive and complete information as necessary.

Please click here for help

Please ensure that you answer all questions truthfully and accurately

All information will be handled in accordance with the Information Privacy Principles.

You must complete all components of this Declaration for your application to progress

1. Have you ever been investigated, arrested, reported for or pleaded or found guilty of any
criminal offence, including any traffic offences?
() Yes
() No
Include dates and details:

2. Have you ever been the subject of allegations of conduct by you of a violent and/or sexual nature towards in relation to a child or children (person under 18 years of age) or an adult person (over 18 years of age)?
() Yes
() No
Include dates and details of the allegations:
3. Have you ever been the subject of allegations or an investigation or any other process relating to alleged unsatisfactory performance or misconduct by you as an employee?() Yes() No
Include dates and details of the allegations or investigation:
 4. Do you suffer from or have you suffered from any mental, psychological, psychiatric or medical condition/s, illness/es, disability/ies, restriction/s, or any learning disability/ies that may affect your ability to carry out the duties of the role you apply for? () Yes () No
Include dates and details of any diagnosed conditions:
5. Are you taking or consuming any prescription medication/s or other substance/s that may affect your ability to perform the duties of the role applied for or give rise to a risk to your health or safety in the workplace or that of other persons?() Yes() No
Include dates and details of any medications or substances:
 6. Have you ever submitted a claim for workers compensation (whether accepted or proven or not)? NB: If you answer yes also give full details of any redemption payouts. () Yes () No Include dates and details (employer at the time, location etc.)
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7. Would you require any special services, support and/or facilities and/or reasonable workplace modifications in order for you to perform the inherent requirements of the duties of the role you apply for? () Yes
() No
Include details of any support you might require:

8. Have you at any time resigned from public sector employment upon accepting a 'Change in Direction' incentive payment or a Targeted Voluntary Separation Package or any other form of redundancy or separation payment?
() Yes
() No
Include dates and details of your public sector employment and separation type and date:
9. Have you been dismissed from any previous employment - for any reason (including but not limited to redundancy)?
() Yes
() No
Include dates and details of any dismissal from previous employment:
10. Have you ever resigned from any previous employment, including by retirement?
() Yes
() No
Include dates and details of any resignation from previous employment:
In the event any further medical information is required, you may be invited to provide management in DECD with authority to seek medical information from any treating medical practitioner/s or from an independent medical practitioner/s. You will be personally liable for any cost associated with ascertaining any further medical information.
Supporting Documentation (if applicable):
I confirm and declare that to the best of my knowledge, I have truthfully answered all questions in this Declaration and provided any supporting information required. () YES
I understand that should my circumstances change such that any information provided in or with respect to this Declaration is materially different, it is my responsibility to advise DECD at the earliest opportunity of the detail of such changed circumstances. () YES
I understand that any false or materially misleading information I provide will result in me not being considered for employment or, in the event that I am offered and accept employment, may render me liable for disciplinary action, which may include termination of employment. () YES
Please enter your name to confirm the above declaration:

13. Attachments This is not a requirement to be a Private Music Instructor. However you are welcome to Resume: attach your resume Australian Birth Certificate or Passport or If you are applying for the first time you need to attach a copy of one of Citizenship Certificate (for first time applicant): these certificates to confirm your identification. If not an Australian citizen a copy of Visa in Passport (if applicable and not previously provided): Leave this section blank in subsequent applications. Additional Relevant Attachments (if applicable): Attach any other documents that may compliment your application as a Private Music Instructor.

Once you receive your 'Authority to Work' letter for the year you have applied please forward a copy to decd.musicprograms@sa.gov.au and provide a copy to each school that you intend to instruct.