

EMPLOYMENT APPLICATION DETAILS

VICSWIM will once again be conducted across the state in January 2009. Program dates are as follows;

Program One:	5 – 9 January 2009
Program Two:	12 – 16 January 2009
Program Three:	19 – 23 January 2009

1. Important Information:

Please take the time to complete all details on the “Application for Employment” form. Please note that your full name, date of birth and email is required for database purposes.

2. Return of Applications:

It is important the “Application for “Employment” form is returned as soon as possible to facilitate initial staff selection at the location. Applications will be accepted after the due date however, persons who return their application by the due date will have first preference of being appointed to their preferred locations. The VICSWIM office will endeavour to place successful applicants to their preferred location. The information on the “Application for Employment” form and the original Victorian Police Check or Working with Children Check is necessary in order to assess the eligibility of applicants for employment in the VICSWIM program. The information supplied is for the use of ARV, as managers of the VICSWIM program, and all information is CONFIDENTIAL. Selection will be based on merit and there will be no unlawful discrimination against persons seeking employment in this program.

3. Check list of documentation to return to be returned no later than 1 December 2008:

- “Application for Employment” Form – **please ensure it is signed.**
- Original Victorian Police Check or Working with Children Check
- Copies of Qualifications (As indicated on page 2 of this document). Please refer to the Attachments Checklist, item 12, on the “Application for Employment’ Form.
- Provide details of two (2) Character Referees in space provided.

Please note: No person will be permitted to commence employment at any location until the VICSWIM office has sighted these qualifications.

4. Send Documentation to:

Aquatics and Recreation Victoria
“VICSWIM”
44-46 Birdwood Street
Box Hill South, VIC, 3128

5. Enquiries:

Phone: (03) 8843 2000 Fax: (03) 9890 5099 Email: info@squarevic.org.au

EMPLOYMENT QUALIFICATIONS

PLEASE NOTE: All VICSWIM Teachers are required to have either a Working with Children Check or a National Police Check by January 2, 2009. (If you have provided us with the above mentioned documentation in the past 12 months you need not do so again unless documentation is not current).

1. TEACHERS IN CHARGE:

Must have:

- AUSTSWIM
- Current CPR
- Character Referees (Only if new to VICSWIM)

Desirable (one or more of the following):

- Basic First Aid
- Senior First Aid*
- Pool Lifeguard

2. TEACHERS:

Must have:

- AUSTSWIM
- Current CPR
- Character Referees (Only if new to VICSWIM)

3. EMERGENCY TEACHERS:

Must have:

- AUSTSWIM
- Current CPR
- Character Referees (Only if new to VICSWIM)

4. ASSISTANT TEACHERS:

This position is for applicants who have a desire to gain the AUSTSWIM qualification in the near future, or whom have completed the AUSTSWIM course and need to do their hours.

Must have (one or more of the following):

- Bronze Medallion or higher
- Pool Lifeguard
- Current CPR
- Basic First Aid
- Senior First Aid

PLEASE NOTE: All qualifications (CPR included) must be current throughout the VICSWIM Summer programs. If expiring before 23 January 2009 the qualifications will need to be updated, and relevant documentation forwarded to ARV by December 1, 2008.

APPLICATION FOR EMPLOYMENT

1. Personal Details:

SURNAME:		GIVEN NAMES:	
DATE OF BIRTH:		MALE <input type="checkbox"/> FEMALE <input type="checkbox"/>	
ADDRESS:			
SUBURB:		POST CODE:	STATE:
PHONE (Home):		PHONE (Mobile):	
EMAIL:			

2. Position Sought:

Teacher in Charge Teacher Assistant Teacher Emergency Teacher

3. Qualifications

Please tick the awards that you hold.

A. Mandatory Qualifications – Please attach copies of all qualifications

AUSTSWIM Teacher of Swimming and Water Safety Certificate –

AUSTSWIM No: _____

Expiry Date: _____

Current CPR Certificate (current for duration of program)

CPR Expiry Date: _____

B. Other Qualifications (tick if applicable)

Current Pool Lifeguard or Bronze Medallion (attach copy to this application)

Other (attach copies of other qualifications to this application)

AUSTSWIM Aquatics for People with Disabilities Certificate

4. Have you ever been employed by VICSWIM?

Yes (go to question 5) No (go to question 6)



5. Recent VICSWIM Program Employment Record

Program: Summer Winter Spring
Position: Teacher in Charge Teacher Emergency Teacher
Venue _____ Year _____

**6. If currently teaching, please provide details of a Professional Referee.
If newly qualified, please provide AUSTSWIM Assessors name and venue details**

Name: _____
Position: _____
Phone: _____
Venue: _____

7. Are you currently employed as a Teacher of Swimming and Water Safety?

Yes (please indicate venue employed at _____)
 No

8. Shirt Size (tick)

S M L XL

9. Hat Size (To determine size measure head circumference)

(59cm) (61cm)

10. Employment Preferences

2009 Summer Program One - Monday 5 to Friday 9 January, 2009

Preference 1 – Venue	Preference 2 – Venue	Preference 3 – Venue

2009 Summer Program Two - Monday 12 to Friday 16 January, 2009

Preference 1 – Venue	Preference 2 – Venue	Preference 3 – Venue

2009 Summer Program Three - Monday 19 to Friday 23 January, 2009

Preference 1 – Venue	Preference 2 – Venue	Preference 3 – Venue



B. Working hour preferences:

Minimum number of classes you are willing to teach?	
Maximum number of classes you are willing to teach?	
Are you willing to work at multiple venues on one day? eg. Essendon in the morning & Maribyrnong in the afternoon.	

11. The Teacher Admin Pack is now available on CD. Would you prefer to receive this via: (tick 1 only)

- CD Hardcopy

12. Attachment Checklist

Please note that the following attachments must accompany your application. Incomplete applications will NOT be considered.

- Current CPR Certificate**
- Photocopy of birth certificate, driver's license or passport**
- Working With Children Check or**
- National Police Check**
- Current Pool Lifeguard/Current Bronze Medallion/ Surf Bronze**
- Other:**

13. Declaration

I, _____, declare that:

- (a) All the information I have supplied in this application is true and accurate.
- (b) I have no illness, injury or health reason, which will preclude me from performing the necessary duties and tasks required of me.
- (c) I am a competent swimmer able to rescue/assist anyone in difficulty.
- (d) I am competent to administer CPR according to the current methods.
- (e) I understand that this application is no guarantee of employment with VICSWIM.

Signature: _____ **Date:** ____/____/____

**Please return completed application to:
VICSWIM: 44 – 46 Birdwood Street, BOX HILL SOUTH VIC 3128**

RC/VICSWIM Use Only

Checked by: _____ Form Complete: Yes No If no, what is required? _____

If new applicant, referee contacted? Yes

Contracted to a venue: Yes No

P1: _____ P2: _____ P3: _____

If no, why?

Contract due by:

TIC W/shop form due by: