



# PACIFIC HILLS CHRISTIAN SCHOOL TUTOR (PROVISION OF SERVICES) APPLICATION FORM

Pacific Hills Christian School is a member of the Pacific Group of Christian Schools trading under the company name of Pacific Christian Education Limited ABN: 11 001 832 828

DigitallyComplete the form using Acrobat Reader (not your web browser) to ensure all content is saved correctly.<br/>If you don't have Acrobat Reader you may download it here: https://get.adobe.com/reader/

Manually Please use black or blue pen. Print in BLOCK LETTERS.

## Position

| Full name | Position applied for | Date |
|-----------|----------------------|------|
|           |                      |      |

## Vision

The purpose of Pacific Hills Christian School is to provide a Christian educational community as a centre of teaching, learning and serving excellence, founded on Biblically-based beliefs, values and behaviour.

## **Mission Goals**

We pursue our vision from a Biblical base by aiming:

#### To be authentically Christian:

- To start and end with knowing God in all endeavours.
- To live under the authority of God's Word, and to interpret it thoroughly and reasonably with the guidance of His Holy Spirit.
- To staff the school with people committed to live worshipfully under God.
- To nurture and encourage students into a reconciled relationship with God through Christ.
- To work as the Body of Christ comprised by those of faith in the school community.

#### To provide quality education:

- To encourage and train students into a love of learning.
- To equip students' minds to understand God's perspective in all areas of learning.
- To help each child achieve his or her God given potential, by providing appropriate educational opportunities according to each one's abilities, including those with intellectual deficits, the learning disabled and the gifted and talented, and those from varying ethnic backgrounds.
- To fulfil all government requirements to enable us to be an accredited educational institution.
- To have the students accept the Biblical principle of stewardship in relation to their gifts.
- To encourage and train students in work habits which can produce outstanding results in all school programs spiritual, academic, cultural, physical.
- To encourage and equip staff in developing their understanding of God's perspective on Christian Education.

#### To practise Christian community:

- To create safe relationships through being just and fair according to Biblical principles.
- To be compassionate and merciful as God is to us.
- To nurture and train students to accept personal responsibility for themselves (self discipline); to act within an ethos of service towards others; and to demonstrate an attitude of care for the environment.
- To encourage the involvement of those supportive of the school ethos who can assist in the teaching and learning at PHCS.
- To develop curriculum that explicitly addresses relational issues.
- To develop community life across all activities of PHCS.
- To maintain and promote K-12 unity throughout the School.

#### **Statement of Faith**

The Bible is God's Word, inspired by the Holy Spirit and without error in the original writings. It is our sole authority and absolutely binding in all matters of faith and conduct.

There is one holy God, existing eternally as Father, Son and Holy Spirit. He is the Creator of all things visible and invisible. Jesus Christ is the Son of God who became man through conception by the Holy Spirit and virgin birth and was without sin.

The Holy Spirit convicts the world of guilt in regard to sin, righteousness and judgement.

Satan is the originator of all evil and through him sin was introduced into the world after the fall of Adam and Eve. Man is, by nature and practice, a sinful creature and is unable, by any personal merit or works, to meet the standards of a holy God.

In love, Jesus Christ voluntarily suffered the penalty of death by crucifixion for the sin of the whole world. He was buried and arose from among the dead on the third day thus signifying God's acceptance of His sacrifice. He is now seated at the right hand of God. By personal faith in Christ one can know the complete forgiveness of sins, be reconciled to God, become a member of the family of God and receive eternal life. Those who do not accept Jesus Christ as Saviour will be separated from God eternally.

Christ lives in every Christian's life by the Holy Spirit from the moment he/she is born again into God's family. The Holy Spirit guides, instructs and empowers the believer for godly living and service.

The Lord Jesus Christ will return in person to receive all believers to Himself and to set up His kingdom. At that time all believers will be united with Him eternally. Then there will be a new heaven and a new earth in which God's sovereignty will be unchallenged.

#### **Summary of Our Worldview**

The Christian philosophy rests upon revealed truth in the Scriptures, truth which is embodied in the teaching of Christ. This teaching includes the following propositions:

- God, Creator of all things which exist outside of Himself, is personally interested in humankind.
- God's interest in humankind extends to a personal interest in each person and all people will give an account to God.
- Humankind, created in the image of God, has fallen short of the mark. As a fallen creature he/she stands in need of redemption.
- God has made provision for humankind to be redeemed through the incarnation, death and resurrection of the Christ.
- · God as a God of justice will ultimately correct the imbalances and injustice, which exist in human life.
- All people are equal in God's sight, as His "offspring" (Acts 17:29), but those who come to Him in faith enter into a new relationship they are born from a new source of life (John 3:16).
- Man has a responsibility under God as a custodian of the earth (Genesis 1:26-28).

I am supportive and committed to the above.

| Full name | Signature | Date |
|-----------|-----------|------|
|           |           |      |

| Position   |                            |          |
|--|----------------------------|----------|
| How did you hear about this position?                                  | Expected commencement date |          |
|  |                            |          |
| Please indicate the days you are available Monday Tuesday Wednesday Th | ursday Friday              |          |
| Personal Information   |                            |          |
| Title       Mr     Mrs     Miss     Ms     Dr                          |                            |          |
| First name/s   | Family name                |          |
|  |                            |          |
| Street address   |                            |          |
|  |                            |          |
| Suburb   | State                      | Postcode |
|  |                            |          |
| Postal address (if different from above)                               |                            |          |
| Suburb   | State                      | Postcode |
|  |                            |          |
| Home phone   | Business phone             |          |
|  |                            |          |
| Mobile   | Email                      |          |
|  |                            |          |
| Date of birth Marital status   | Number of dependents       |          |
|  |                            |          |
| Church attending   | Minister's name            |          |
|  |                            |          |
|  |                            |          |
| Attendance Weekly Monthly Occasionally                                 |                            |          |
| Emergency Contact  |                            |          |
| First name/s Family name   | Phone nu                   | mber     |
|  |                            |          |

## Health

Do you have any medical conditions which may affect your capacity or suitability to perform the duties of the position for which you have applied?

No

If yes, please provide details below

## Education

#### **Secondary**

| School  | Level attained                           |  | Years of attendance |
|---|--|--|---------------------|
|   |  |  |                     |
| <b>Tertiary</b><br>Name and location of Institute | Degree, diploma or certificate conferred | Full time equivalent<br>years of study | Years of attendance |
|   |  |  |                     |
|   |  |  |                     |
|   |  |  |                     |
|   |  |  |                     |

No

Yes

Do you hold a current First Aid Certificate?

## **Professional Associations**

List any professional associations of which you are a member.

## **Hobbies and Interests**

Please list your other areas of interest.

## **Salary and Conditions**

An invoice will be prepared in accordance with your monthly time sheet and will be paid in due course.

Please provide your ABN Number

Please provide your Public Liability and Professional Indemnity Insurance

Company name

Phone number

## Past Work Experience

## Position 1

| Position I              |                               |
|-------------------------|-------------------------------|
| From (MM/YY) To (MM/YY) | Name and location of employer |
|                         |                               |
| Position held           |                               |
|                         |                               |
|                         |                               |
| Reason for leaving      |                               |
|                         |                               |
|                         |                               |
|                         |                               |
|                         |                               |
| Position 2              |                               |
| From (MM/YY) To (MM/YY) | Name and location of employer |
|                         |                               |
| Position held           |                               |
|                         |                               |
|                         |                               |
| Reason for leaving      |                               |
|                         |                               |
|                         |                               |
|                         |                               |
| Position 3              |                               |
|                         |                               |
| From (MM/YY) To (MM/YY) | Name and location of employer |
|                         |                               |
| Position held           |                               |
|                         |                               |
|                         |                               |
| Reason for leaving      |                               |
|                         |                               |
|                         |                               |
|                         |                               |
| Position 4              |                               |
| From (MM/YY) To (MM/YY) | Name and location of employer |
|                         |                               |
|                         |                               |
| Position held           |                               |
|                         |                               |
| Reason for leaving      |                               |
|                         |                               |
|                         |                               |
|                         |                               |

## **Christian Experience and Christian Understanding**

#### **Christian experience**

How long have you been a Christian?

Give a brief account of your Christian journey

What is your involvement at your church?

What is the name and telephone number of the minister/pastor/elder to whom we could refer?

## **Christian understanding**

What is your definition of a Christian?

How you would explain the Christian Gospel to a friend?

Describe how you integrate Christian beliefs and values into your teaching (Teaching Staff only).

Do you agree with the enclosed Statement of Faith? If not, please provide details.

## General

What attracts you to this position?

What are your main strengths?

What areas do you need to improve?

Additional comments

## **Religious Referee**

Name

Church

Position

Phone

We require a letter of reference from the minister or pastor of the church that you regularly attend.

## **Professional Referee**

Please provide the name and contact details of two persons to whom reference may be made in regard to professional competency and character. One of these persons must be a recent employer.

Please note, referees may be contacted at any stage in the process. Therefore, you should ensure that you have advised them that they may be contacted to discuss your application.

## **Referee 1**

| Name     |          | Phone |
|----------|----------|-------|
|          |          |       |
| Employer | Position |       |
|          |          |       |

#### **Referee 2**

| Name     |          | Phone |
|----------|----------|-------|
|          |          |       |
| Employer | Position |       |
|          |          |       |
|          |          |       |

We require a letter of reference from at least one professional referee.

## **Working With Children Check**

The Pacific Group of Christian Schools is a child safe workplace. Please provide your Working With Children Check number for verification. This enables the School to fulfil its responsibilities under the Commission for Children and Young People Act 1998 (NSW) (as amended or replaced from time to time), and any other applicable legislation dealing with child protection.

So that your application can be considered please provide the following:

Your WWCC number

Expiry date

## Proof of Australian Citizenship or Working Visa

Please provide proof of Australian citizenship or approval to be actively engaged in paid work in Australia (e.g. photocopy of Australian Birth Certificate or Working Visa). The copy you provide must be certified by a Justice of the Peace as being a true copy.

## **Production of Evidence Qualifications**

Please attach certified copies of original documents as evidence of academic qualifications (where applicable) e.g. certificates or academic transcripts. Photocopies of certified documents will not be accepted.

## **Privacy Statement - Collection Notice**

• In making this application you will be providing New Hope Christian School with personal information.

- If you provide us with personal information such as your name, address and information contained in your resume, we will collect that information with the primary purpose of assessing your application.
- We will not disclose the information you provide in this application to a third party without your consent.
- We are required by law to receive a Working With Children Check Number (with expiry date) as part of our Duty of Care responsibilities.
- If you provide us with personal information of others such as referees we encourage you to advise them that you are disclosing this information to us and that they may be contacted by us as part of the process of assessing your application, that they may access this information if they wish and that the School does not normally release this information to third parties.

## Signature

Having completed all the above questions, read the Statement of Faith, Vision and Mission of Pacific Christian Education Limited. I hereby apply for to the above contractor position. In returning this form, I certify that the information on this form is complete and correct in every detail and I understand that deliberate inaccuracies or omissions may result in non-acceptance of this application and/or termination of contract.

Full name

Signature

Date

## Checklist

If you proceed to making an application, PLEASE ensure ALL items on the following checklist are COMPLETED and INCLUDED in your application. An incomplete application may not be considered. (Please add tick boxes for each item)

| Statement of Faith signed (page 2)   |
|--|
| CERTIFIED copies of qualifications   |
| CERTIFIED photo ID   |
| CERTIFIED proof of permission to work in Australia (Australian passport/birth certificate or VISA) |
| Written References (Religious)   |
| Written References (Professional/Character)  |
| Working with Children Check number provided (or application number)                                |
| ALL sections of application form completed and enclosed  |
| Australian Business Number provided  |
| Public Liability and Professional Indemnity Insurance company name and phone number provided       |
|  |