



Children's Sports Facilitator

APPLICATION FORM

Full Name:

Contact Number:

Date of Birth:

Email Address:

Postal Address:

Emergency Contact:

Drivers Licence Number:

Polo-Shirt Size (please circle): XS S M L XL XXL

Locations prepared to work (please circle): North South East West

Current Availability (please tick):

Day of Week	During School Hours (8.45am – 3.15pm)	After School Hours (3.15 – 5.00pm)
Monday		
Tuesday		
Wednesday		
Thursday		
Friday		

When are you available to commence work:

Are you prepared to deliver school holiday programs (please circle): YES / NO

Do you currently have any of the below certifications (please tick):

DCSI Child-Related Employment Screening *

First Aid Certificate *

RAN-EC 2015-17 Full Day Training

Community Coaching General Principles (CCGP)

Other coaching qualifications (please list below)

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** Please note if you do not possess a DCSI Child Related Employment Screening or First Aid Certificate, this must be obtained prior to employment at your own cost.*



Applicant Questions

1. Why have you applied for the position?

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2. Please outline your previous experience working with children.

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3. Please outline your previous coaching experience.

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4. Please list the sports you have participated in.

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5. Please provide details of any sports or activities you would feel confident to deliver as part of a program.

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Please list two referees below:

Referee 1

Name:

Contact:

Relationship:

Referee 2

Name:

Contact:

Relationship:

Signature:

Date:

Privacy Statement: Please note Stay Active Children's Sports Programs Pty Ltd will only record this information for the purpose for which it was provided and we will not disclose it without obtaining your consent. We take all reasonable steps to protect personal information from misuse, loss and unauthorised access, modification or disclosure.