



EDUCATOR APPLICATION

Your Details:

Name:

Address:

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Date of Birth: Ethnicity:

Phone Numbers: () ()

E-mail address: Fax: ()

Bank Account:

Who lives at your home?

Name:	Date of Birth	Gender: M/F	Relationship to you	Times usually home

What appeals to you about becoming an in-home educator with Sprouts?

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Indication of availability:

- Full time
- Part time
- Under two years old
- Over two years old
- Special Needs
- Other

Referees:

At the time of your interview you will be asked to nominate 2 other referees who know you well enough to be able to comment on you suitability:

Police Checks:

Everyone in the home over the age of 17 must complete consent to disclosure Form

Do you currently care for any children, other than you own, on a regular basis?

- Yes
- No

I certify that this information is true and correct:

Signature: Date:

Please return completed forms in the envelope provided.

OFFICE USE: TRAINED

UNTRAINED

PAY RATE: \$