



Incorporating Multicultural Resource Centre

1st floor, 9-11 Stewart Street, Richmond 3121, Australia
 tel +61 3 9428 4471 fax +61 3 9429 9252
 e-mail fkacs@fka.com.au website www.fka.com.au

CASUAL BILINGUAL WORKER

Please return to: **FKA CHILDREN'S SERVICES INC.**
1ST FLOOR, 9-11 STEWART STREET
RICHMOND VIC 3121

PLEASE PRINT

Date of application:

Given Name: Family Name:

Address:Postcode:

Phone: (Home)..... (Work) (Mobile)

Email:

Country of origin;

Country of birth:

Date of arrival in Australia:

Are you a permanent resident of Australia? YES NO

If no, do you have a current work permit? YES (please attach a copy) NO

Do you have a current employee 'Working With Children' check? YES (please attach a copy) NO

Cultural background: Religion:

First language: Occupation:

Other languages spoken:

Do you own and drive a car? YES NO Are you willing to travel for more than 30 minutes to get to work? YES NO

Do you have a current Victorian Drivers Licence?

How did you hear about this position?

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Do you have contact with Ethnic community groups? If so which ones?

Please describe any previous experience that you have had working with children and families:

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Please list any qualifications that you have:

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What skills do you have that would be useful working with families and children? Please describe:

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REFEREES:

Please write the names and phone numbers of two people who are not related to you that can provide a character reference for you. For example an employer or teacher.

1. Name: Phone: Relationship.....

2. Name: Phone: Relationship.....

Please note FKA children services will contact these people as part of the application process.

Comments to support your application:

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OFFICE USE ONLY

Interviewers:

1. 2.

Interview Date: Time:

Approved YES.. NO..

General Comments

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