**Armidale Diocese CSO Clusters Placement Assistance Form**

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| **Teacher Education Student - Personal Information** |
| **UNE ID Number:** |  | **Date of Birth:** |  |
| **Name:** |  |  |  |
|  | **Title** |  **Given Name(s)** |  **Surname** |
| **Address:** |  |
| **Suburb:**  |  | **State:**  | **Postcode:**  |
| **UNE Email Address:** |  | **Contact Phone No:** |  |
| ***I have completed the following Mandatory Certificates and attached/uploaded them to*** [**In-Place**](https://inplace.une.edu.au/Security/Account.mvc/LogOnFederation?ReturnUrl=%2fdefault.aspx) ***for verification.*** |
| [ ]  **NSW Working with Children (WWC) No:** |  | **Expiry Date:** |  |
| [ ]  **Interstate WWC No.** (or equivalent)**:** |  | **Expiry Date:** |  |
| [ ]  **DEC Child Protection Certificate** | [ ]  **ASCIA Anaphylaxis Certificate** | **Expiry Date:** |  |
| **THIS IS MY FINAL PROFESSIONAL EXPERIENCE PLACEMENT:**  **I have passed the Literacy and Numeracy Test:** [ ]  **My WWC number is for paid employment** (not volunteer work): [ ]  |
| **\*\*\* DO NOT submit ‘Placement Assistance Form’ via AskUNE if any of the required mandatory certificates****are not current and attached/uploaded and visible on** [**In-Place**](https://inplace.une.edu.au/Security/Account.mvc/LogOnFederation?ReturnUrl=%2fdefault.aspx) **\*\*\*** |
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| **UNE Enrolment Information** |
| **Study Mode:** | **On-Campus** [ ]  | **Online** [ ]  |
| **Course Name:** |  |
| **Professional Experience Unit:** (e.g. EDLT302 or EDSP324) |  | **Trimester:**  |  **1** [ ]  **2** [ ]  **3** [ ]  |
| **IMPORTANT:** You are required to submit a form for each PrEx unit **i.e. two PrEx units, two forms.**  |

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| **Previous Professional Experience Placement/s** (if applicable) |
| **School, Centre or Agency** | **Subject Area/ Year Group** e.g. Science (Chemistry) / Years 5 & 6 /  | **Result**(e.g. SR) | **Total Days** | **Year****completed** |
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| **Placement dates and Subject Area / Year Group** |
| **Cluster(s)**Select the High School ClusterOR1 to 4 Primary Clusters | **Preferred placement dates**Complete a separate Placement Assistance form for each placement | **Subject Area / Year group**e.g. Science (Chemistry) Years 5 & 6  | **Placement cannot take place in these Schools due to a Conflict of Interest**(Attach supporting documentation) |
| High School Cluster [ ] Armidale Primary Cluster [ ] Tamworth Primary Cluster [ ] Northern Primary Cluster [ ] Western Primary Cluster [ ]  | Commencing April 29th [ ] Commencing August 12th [ ] Commencing November 4th [ ]  |  |  |

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| **Teacher Education Student’s Declaration*** I understand I may not receive the class or stage I have requested for a primary school placement.
* I understand I cannot submit my Placement Form without a valid WWC Number, ASCIA Anaphylaxis or DEC Child Protection Certificate and will provide copies to the OPL.
* **I understand I cannot commence my placement unless I have received my ‘Confirmation of Placement’ email from the OPL. Commencing my Placement before receiving my confirmation letter, means the entire placement is invalid.**
* I have already declared to the OPL any Conflict of Interest (e.g. family, children or close friends etc.) employed, engaged or enrolled at the placement preference/s above.
* **I will access the Moodle PREXUS site and familiarise myself with the relevant Specific Professional Experience Placement Requirements before I engage with a school, centre or agency where my placement has been confirmed.**
* For communication purposes, I authorise the sharing of my relevant personal information, including but not limited to my: name, student number, UNE email address, phone contacts, Date of Birth and WWCC information, with my placement Supervisor and/or staff at the directorate, school, centre or agency where I have requested/confirmed a placement.
* **I understand when the OPL approaches schools, centres or agencies for a placement on my behalf, it may be a lengthy process.**
* I understand I cannot commence my final professional experience placement until I have obtained a Working with Children number for paid employment **and** passed the Literacy and Numeracy Testing.
* **I am aware that I may be placed in any school within the nominated cluster(s).**
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| **My signature verifies all details provided on this placement form to be true and correct.** |  |  |  |
| **TES’s signature** | **TES UNE ID Number** | **Date** |
| **Please return all placement forms to the OPL via AskUNE.** Due dates for placement forms: **Trimester 1 - February 22, Trimester 2 - April 29 and Trimester 3 - July 8.** |