

LCA NSW DISTRICT

SPECIAL RELIGIOUS EDUCATION TEACHER'S ENGAGEMENT FORM

(For use in NSW Lutheran parishes from 2015 until further notice)

Name: (Rev, Dr, Mr, Mrs, Ms)

Address:

..... Postcode:

Telephone: Email:

WWCC Number: Expiry Date: Date of Birth:

Responsible to:
(name of minister in charge of the parish)

Parish:

School(s) in which I am authorised to teach:

Infants / Primary: Secondary:

General Conditions:

I agree to carry out my task as a volunteer SRE teacher in accordance with the principles and policies of the Lutheran Church of Australia, New South Wales District, and the guidelines of the NSW Department of Education and Training. I undertake to exercise due care for the safety and behaviour of students when teaching or supervising them. I acknowledge that the teaching given to students in the SRE classroom shall at all times be the highest quality possible.

No remuneration is paid to me as a volunteer SRE teacher or helper, nor may I incur any expenses without prior approval.

Volunteer Statement:

(a) I acknowledge that the Lutheran Church of Australia, New South Wales District has special responsibilities to the students, their parents, and carers and to the school authorities because of the opportunities given to the Lutheran Church of Australia, New South Wales District to instruct students in Special Religious Education.

(b) I agree to carry out those tasks in accordance with the general conditions set out above, and any special conditions as follows:

(c) I wish to volunteer my services on the above basis to the Lutheran Church, New South Wales District, and I acknowledge that I am responsible to the Minister in charge, the Rev, of the parish which has responsibility for the schools in which I teach, and his/her successors.

(d) I undertake to teach SRE from the approved curriculum materials as directed by my minister in charge or the church SRE coordinator. Approved Curriculum used:

(e) I have completed/will complete accredited Initial training (ICCOREIS NSW Inc SRE Training Framework) within the next 6 months, and commit to ongoing training. Dates and location of training modules completed:

.....

Volunteer Statutory Declaration:

I hereby solemnly and sincerely declare that:

(a) I have never been convicted for any criminal offence which involves:

- (i) an act of violence towards another person or
- (ii) sexual assault or
- (iii) any offence against a minor person or
- (iv) provision of prohibited drugs

(b) I understand that I am required to provide my WWCC Number to verify the accuracy of this statement.

(c) I understand that should I fail to meet my commitments as set out above, I could be asked to withdraw from the ministry of SRE in schools.

I understand also that any authorisation may be withdrawn at any time.

(d) If I am charged with any crime referred to in (a) above, or if I am under investigation by the police or officers of the Department of Community Services or the Department of Education and Training, I will notify the minister in charge immediately.

And I make this solemn declaration conscientiously believing it to be true and in accordance with the provisions of the Oaths Act 1990.

Declared at: on:
(place) (date)

Signature:

in the presence of an authorised witness, who states:

I, a
(name of authorised witness) (qualification of authorised witness eg. JP or solicitor)

certify the following matters concerning the making of this statutory declaration by the person who made it:
(*please cross out any text that does not apply)

- 1 *I saw the face of the person **OR** *I did not see the face of the person because the person was wearing a face covering, but I am satisfied that the person had a special justification for not removing the covering, and
- 2 *I have known the person for at least 12 months **OR** *I have not known the person for at least 12 months, but I have confirmed the person’s identity using an identification document and the document I relied on was:

.....
(describe identification document relied on)

Witness: Date:
(signature of authorised witness)

Authorisation of Minister:

As the Minister in charge of the parish, I approve authorisation of
as a teacher of SRE. (name)

Signed: Date:
(minister in charge of the parish)

A separate declaration should be completed for each parish in which a teacher or helper works. Non Lutheran teachers and helpers who assist in joint-denominational SRE, only need to complete an engagement form for the Christian denomination to which he/she belongs.

RECORDS: Original to be held in the parish and accessed only by the minister in charge. A copy must be forwarded to the LCA NSW District Office, email to admin@nsw.lca.org.au or post to PO Box 3056 Rhodes NSW 2138