



**Bachelor of Teaching
(Early Childhood Services)**

Indigenous Program

**Alternative Entry Program Application Form
Intake Year 2009**

Students seeking entry to the Bachelor of Teaching (Early Childhood Services) must complete this form and attend an On-Campus School in the year prior to entry before being considered for entry to the program.

Return the form to:
“Alternative Entry Application, BTeach Program”
 Warawara
 Macquarie University, NSW 2109.

Or fax it to: 02 9850 7735

YOUR NAME

DATE OF BIRTH

ADDRESS

TEL. & FAX CONTACTS

YOUR EMPLOYER

CONTACT PERSON (Manager or Your Supervisor)

EMPLOYERS ADDRESS

TEL. & FAX CONTACTS

It is very important for entry to the program to have the support of your employer. Have you discussed the program with your employer? YES NO

Is your employer supportive of your entry to the program? YES NO

STATEMENT OF CHILDRENS’S SERVICE EXPERIENCE

Name, Address & Tel. No of Service (use a separate line for each employer)	Role while Employed in Service	Period of Employment in Service	Referee for Contact with Service

STATEMENT OF EDUCATION EXPERIENCE

	School or Institution Attended	Level of Award or Highest Level of Achievement	Year of last attendance
High School Education			
Post Secondary Studies (incl. Uni., TAFE & other tertiary)			
Other courses			

STATEMENT ON REASON FOR SEEKING ENTRY TO THE PROGRAM AND COMMITMENT TO WORKING WITH CHILDREN
