



Application to Offer Accommodation Form

Date: _____ Available commencement date: _____

PERSONAL INFORMATION

Surname: _____

Given name/s: _____

Preferred name: _____

Address: _____

Postcode: _____

PERSON TO CONTACT IN CASE OF EMERGENCY

Name: _____

Relationship to applicant: _____

Address: _____

Contact numbers: Home _____ Work _____

ACCOMODATION

Home status	Rent	Own
No. of rooms available		
No. of days available		
Current Working with Children Check	Yes – fill out information below	No – Apply online, link below
WWCC Card Details	Card no:	Expiry:

WWCC Link <https://www.service.nsw.gov.au/transaction/apply-working-children-check>

Signature of candidate.....

Date.....