



Application Form for a Member of the Examining Group

I am interested in being a member of the examining group for the:

- development of the sample examination materials (courses only)
- development of the final 2009 TEE/WACE examination materials for a subject/course.

1. Personal details

Surname: Given names: Title:

2. Position

<i>Position</i>	<i>Please tick (✓)</i>	<i>Subject/Course (please state)</i>
Coordinating examiner		
Chief examiner		
Examiner		
Independent reviewer		
Final checker		

The role and responsibility of each of the above positions are outlined in the document titled "*Membership of examining groups for TEE/WACE examinations*".

3. Contact details

	Home		Work	
Address				
Phone				
Mobile				
Email				
Affiliation (please circle)	University	Training	Industry	Secondary

4. Relevant experience

Please provide:

- brief curriculum vitae, including teaching and marking experience in the relevant subject/course.
- the name and contact details of two referees.

5. Declaration

I declare that I have read and understand the eligibility criteria set out in the *Code of Conduct for Examining Group Members*.

I declare that I do not currently violate the conflict of interest criteria and that I will not violate them should I become appointed to a position.

Signature _____ Date _____

Please mark your application private and confidential and submit it to:

Mrs Jenny Morup
Manager Certification and Examinations
Curriculum Council
27 Walters Drive
OSBORNE PARK WA 6017

by 25 July 2008.