

### SRE Authorisation Form

Name:		Position:	
Date of Birth:		WWCC:	
Contact Number:		Email:	

Approved SRE Teacher			
Approved by:		Date:	
School:		Stage:	

1. I understand that SRE is governed by the DoE (NSW Department of Education) and I commit to teaching SRE subject to the NSW legislation, the guidelines of the Australian Islamic Education Services (AIES), and the policies of the school.
2. I recognise the AIES is the authorised provider for SRE; the [INSERT NAME] is the authorised representative of the [INSERT CORRECT NAME OF IMAMS COUNCIL] and the authorising of SRE teachers is delegated by the Recruitment Committee.
3. I accept my authorisation to teach SRE is subject to the ongoing approval of the authorising Recruitment Committee. This approval can be rescinded at the discretion of the authorising [INSERT PERSON].
4. I undertake to exercise due care for the safety and behaviour of students when teaching or supervising students.
5. I agree to use the authorised curriculum of the AIES and recognise that the teaching given to students in the SRE classroom must at all times be consistent with the authorised curriculum.
6. I agree to complete training as set out by the AIES; including being observed teaching one lesson annually.
7. I have completed training in accordance with the requirements of the AIES and the Recruitment Committee.
8. I have received a Working with Children Check number and I have not been convicted for a crime against a minor, violence, assault or providing prohibited drugs.

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Teacher Name

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Recruitment Committee Representative

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Teacher Signature

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Recruitment Committee Representative

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Date

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Date