

Authorisation Letter in the Circumstances of a Combined Arrangement

Approved providers of Special Religious Education (SRE) in a combined arrangement and authorised teacher/s of SRE

Dear Principal of _____(name of school)

The combined Christian arrangement is comprised of the SRE approved providers listed below. The names of the approved providers are to go on the school website.

Approved providers are listed in the Department’s Religion and Ethics site:
<https://education.nsw.gov.au/religion-and-ethics>.

Name of Approved Provider	Provider Website	Local representative	Contact details
Roslyn			

I confirm that the following teacher/s have been authorised to teach SRE having completed the authorisation process of their approved provider in line with the Department’s SRE procedures and annual assurance process.

The approved providers’ authorisation process includes:

- the verification of a current *Working with Children Check*
- Child Protection training (meeting the relevant requirements under *the Child Protection Working with Children Act 2012* and the *Child Protection Working with Children Regulation 2013*)
- SRE teacher training

Full name of teacher	Date of birth	Contact details	Approved provider

Schools are required to cross reference name/s and DOB on the Not to be Employed database via ECPC. Schools do not collect the WWCC number or 100 points ID for SRE teachers. This is the responsibility of the approved provider.

Authorised teachers, on school sites, will display their name and the name of the approved provider on a badge.

Complaints that are the responsibility of the approved provider are to be referred to the local representative of that approved provider.

The curriculum scope and sequence has been authorised by _____(name of approved provider).

The title of the curriculum is _____

The link to the authorised curriculum scope and sequence is to be placed on the school website and is available at _____(insert web address).

Yours sincerely

(signature or by email*)

_____ (name of coordinator) _____ (position)

_____ (phone) _____ (email)

_____ (date)

** The name of the person forwarding the authorisation letter by email confirms that the information in the email is correct.*