



Employment Application Form

For Your Information

The information within the Application will be used only for Recruitment Processes and will be distributed to the Manager. Applications will be kept confidential.

Work Request Information

First Name: **Last Name:**

Preferred Position:

Preferred Work Option (please tick): Full Time Part Time

Other Positions you would consider:

Availability to work (please tick):

- Everyday including shift work
- Week days only
- Weekends only
- Day time only
- Other – please specify:

When can you start work?

Hours you are available:

Personal Information

Home Number: **Mobile Number:**

Email Address: **Date of Birth:**

Are you an Australian Citizen? Yes No

If not, what is your current Residency Status? Temporary Permanent

Type of Visa: **Expiry Date:**



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Employment History

Please list most recent position first:

Dates (Start and End Dates)	Position Held	Organisation	Referee, Position and Contact Number

Education

Institution	Date From	Date To	Course	Level Achieved

Capacity to Work Declaration

Can you meet the requirements of start and finish times of shifts?	<input type="radio"/> Yes <input type="radio"/> No
Due to Work Health and Safety requirements, do you have any condition that will cause you to be absent from the workplace for prolonged periods of time and/or pose a significant risk to others? If yes, state details:	<input type="radio"/> Yes <input type="radio"/> No
Do you have any condition that will, in any way, hinder your current or future ability to perform the position for which you have applied? If yes, state details:	<input type="radio"/> Yes <input type="radio"/> No

Applicant Declaration

I certify that the information supplied in my resume and within this Employment Application is true and correct to the best of my knowledge. I understand that false, misleading or non-disclosure of information may result in future disciplinary action including termination of employment. I authorise for my referees that are listed on my resume to be contacted.

Signature: **Date:**

OFFICE USE ONLY

Manager's Comments/Recommendation:.....
.....
.....

Resume Attached: Yes No
Photograph Attached: Yes No