

GENERAL EMPLOYMENT APPLICATION FORM

Position Applied for:

Department:

Site Location:

Personal Details

Surname: Given Names:

Address: (No. and Name of Street)

Suburb: Postcode:

Mobile No: Work No: Home No:

Email:

Residency status: Australian Citizen *Permanent resident *Student
*Temporary working visa *Other

(* Please also complete the Department of Immigration Form and provide original documents for sighting)

Emergency Contact

Surname: Given Name: Relationship

Mobile No: Phone No:

Health Details

Have you sustained an injury or have a medical condition that could affect your ability to perform the inherent requirements of the position applied for?

Yes No

If yes, nature of Injury: Time lost

If yes, did you claim worker's compensation?

Yes No

Employment History

If you are not submitting a full resume, please complete an accurate working history

Employment Dates	Company Name	Position	Duties
e.g. 6/5/98 – 15/8/00	David Jones	Assistant Manager	Rosters, Recruitment, product display

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Tertiary Qualifications

Have you completed any tertiary courses, or undertaken any short term training/workshops? (Original documents will be required for sighting and copying at Interview).

Course Attended	Institution	Year Completed

Miscellaneous

Do you hold a current First Aid Certificate? (Provide originals for sighting and copying at interview)
Yes No

If yes, what level?

Expiry Date:

Do you hold a current Driver's License? (Provide originals for sighting and copying at interview)
Yes No

If yes, Class:

License Number:

Have you ever undertaken training in Occupational Health and Safety? Yes No

If yes, course:

Year completed:

Are you prepared to attend training arranged by the Association? Yes No

Have you previously worked for ParaQuad? Yes No

Where did you see this position advertised? i.e.: newspaper, seek, website.

Cultural Diversity – (Answers are Optional. The data gathered here is used for statistical purposes only and has not and will not influence the selection process or outcome).

Are you of Aboriginal or Torres Strait Islander origin? Yes No

What is your Country of Birth?

What is your First Language?

What languages are you proficient in?

ParaQuad is an Equal Employment Opportunity employer. If you have a disability and require employment support (i.e. vehicle transfers, personal care, administration assistance) please ask the Recruitment Manager for an "Employee Workplace Modification Form". This should be included with your application and will allow us to assess your suitability to funding and/or provision for adequate employment support.

Department of Immigration and Multicultural Affairs



**AUTHORITY TO OBTAIN
DETAILS OF WORK RIGHTS STATUS FROM DIMA**

EMPLOYEE DETAILS

(As specified in passport or other identity document)

Family Name:

Given Name(s):

Other Name(s) used (e.g. maiden name):

Date of Birth: / /

Nationality:

Passport Number:

Visa Number:

Visa Expiry Date: / /

I authorise the Department of Immigration and Multicultural Affairs (DIMA) to release the details of my work rights status (that is, my entitlement to work legally in Australia) to the employer/labour supplier named on this form.

I understand that these details are held by DIMA on departmental files and computer systems. I also understand that the employer/labour supplier will use this information for the purposes of establishing my legal entitlement to work in Australia, and for no other purpose.

Employee Signature: _____

Date: / /

IF ALL DETAILS MATCH WITH OUR RECORDS, THE EMPLOYEE'S WORK RIGHTS STATUS WILL BE FAXED TO YOU WITHIN ONE WORKING DAY.

How Did You Hear About Us? (Please choose)

- ParaQuad Website
- Social Media
- Print Advertisement
- Careers website
- Friend
- Event
- Other

I understand that the information I provide in support of my application will be destroyed 2 weeks after the recruitment process if I am deemed unsuitable for the position for which I am applying, unless otherwise agreed in writing by both parties. The purpose for retaining these documents for a period of 2 weeks is for reference in the event of an applicant's grievance in relation to the recruitment process.

I certify that the information set out above is to the best of my knowledge, true and accurate in every detail. I understand that ParaQuad reserves the right to verify all information on this application and that any false statements will be considered sufficient cause for my rejection as an applicant, or my dismissal if employed.

(Name of Applicant)

(Signature of Applicant)

____ / ____ / ____
(Date)