

we manufacture quality

# Job application form

## PERSONAL DETAILS

Surname			Given name			
Preferredname		;				
Address						
Date of Birth						
Home phone						
Mobile phone						
Email						
What type of work are you available for? (tick one)			Full-time Part-time Casual			
CURRENT QUALIFICATIONS						
Qualification title		Institution/Training provider				Yearcompleted
Are you currently undertaking st	udy/training?	(tick one)	Ye	es 🗌 No		
Course/program name						
Full-time Part-time	Distance	Other				
PREVIOUS EMPLOYMENT (N	IOST RECENT	FIRST PLEAS	SE)			
Employer name/establishment		Position h		Reason for lea	ving	Office use check
	from/to					Initial/date

#### REFERENCES

Do you agree to have referees contacted in relation to this application? (tick one)

No

(Reference checks will be conducted legally in an ethical manner and all information derived will remain confidential.) Please provide details of three people who can speak on your behalf regarding your work history.

Name	Contactnumber	Position held/working	Office use
		relationship (forexample,	check

# Job application form continued

### **OTHER INFORMATION**

When will you be available to start work?	
Please provide any other information that you	
identify as being pertinent to this application?	
(for example, medical conditions, disabilities)	

### DECLARATION

Ideclare that to the best of my knowledge the information given is true and correct. I understand that in accurate, misleading or untrue statements or knowingly withheld information may result in termination of employment with this organisation. I understand that this application does not constitute an offer of employment. I understand that, in some cases, police and credit checks will be required and I will be notified if this applies to this application.

Signed	Date
signed	Date