

APPLICATION FOR EMPLOYMENT			
Position Applied For:			
PERSONAL DETAILS			
Surname:			
Given Names :			
Preferred Title: Mr/Mrs/Miss/Ms		Other:	
Residential Address			
Date of Birth:			
TELEPHONE NUMBER:		MOBILE NUMBER:	
EMAIL ADDRESS:			
Are you an Australian Citizen?			
Do you have a current Working Visa:		EXPIRY DATE	
EMPLOYMENT HISTORY			
Current/Most Recent	Position	From	To
<i>Reason for Leaving:</i>			
Second Most Recent	Position	From	To
<i>Reason for Leaving:</i>			

REFEREES			
List names and telephone numbers of referees who have supervised your work and whom we may contact.			
NAME:		CONTACT NO:	
NAME:		CONTACT NO:	
DRIVERS LICENCE INFORMATION			
Drivers Licence No.:	Classes:	Expiry Date:	
EDUCATION/TRAINING			
Secondary			
HIGHEST LEVEL ATTAINED			YEAR
SCHOOL			
Post-Secondary <i>(Please list any professional qualifications and/or special skills training.)</i>			
Institution	Subjects Taken	Year	Results
Current Studies			
Qualifications: Are your qualifications registered in Western Australia?			

ADDITIONAL INFORMATION	
When would you be able to commence employment?	
If employed, minimum period of notice required:	
Comment: (Optional)	
NOTE: ANY OFFER OF EMPLOYMENT IS SUBJECT TO A PRE-EMPLOYMENT MEDICAL WHICH WILL INCLUDE A DRUG AND ALCOHOL TEST	
Convictions: Do you have any convictions for any offences from any court, or are you currently the subject of any charge pending before any court? You do not need to give details of any conviction which you have declared.	
YES	<input type="checkbox"/>
NO	<input type="checkbox"/>
THE FOLLOWING QUESTIONS ARE OPTIONAL AND NEED NOT BE COMPLETED. NON-COMPLETION OF THESE ITEMS WILL IN NO WAY PREJUDICE YOUR APPLICATION FOR EMPLOYMENT.	
Do you speak any language other than English?	
Sporting interests/hobbies	
Membership of Professional bodies:	
Any further information you wish to provide in support of this application:	
DECLARATION	
I certify that the information is, to the best of my knowledge and belief, true and accurate. I understand that the Local Government reserves the right to verify all information in the application.	
Signature of Applicant	Date

PERSONAL AMBITIONS AND ACHIEVEMENTS

1. What type of work do you find most interesting?

2. What do you feel are your greatest strengths, in the workplace?

3. What do you consider to be your weaker points, in the workplace, which may require development/training/education?

4. What do you consider to be your greatest achievement so far?

Signature _____

Date _____