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Example – Application Form

Applicant Details:

Full Name: _____ Date of Birth: _____

Address: _____

Suburb: _____ Post Code: _____

Phone No: _____ Other Contact No: _____

Mobile: _____ Email: _____

Relevant Education: _____

☐ First Aid Cert: Expiry Date: _____ ☐ CPR: Expiry Date: _____

☐ Positive Notice Card: Expiry Date: _____ Blue Card: Expiry Date: _____
(worker is required to obtain Blue Card or Positive Notice Card at cost of $73.45 – if working with children must be Blue Card)

Relevant Work/Life Experience: _____

_____

Transport ☐ Own transport: ☐ License: Manual / Automatic ☐ Will use car for work purposes

☐ Insurance: ☐ Car is registered & road worthy. ☐ Third party property ☐ Comprehensive

Availability

Number of hours preferred each week _____

What hours can you work? (eg Weekends, Sleepovers)_____

Health and Safety

Do you have any pre-existing injuries that may impact on your ability to provide personal, physical or emotional support or anything that we should know about as an employer that could endanger you as a worker or the person supported?

☐ No ☐ Yes, provide details:_____

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Visa Restrictions

Do you have a residency or work visa restriction? (Please check conditions of Visa – work hour limits apply in some circumstances. Eg Working Holiday Visa, Student Visa, Defacto Visa)

☐ No ☐ Yes

Relevant work based References:

Name:		*Name:*	
Organisation:		*Organisation:*	
Phone Number:		*Phone Number:*	

Employee's Name: _____ Signature: _____ Date: _____