**APPLICATION FOR EMPLOYMENT **

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| **POSITION APPLIED FOR:**  JOB TITLE: Service and Installation Technician  CASUAL/TEMP ❑: FULL TIME X: | |
| AVAILABILITY TO COMMENCE: \_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ | Are you prepared to work these shifts? *(tick all that apply)*  Morning ❑ Afternoon Shift ❑ Night Shift ❑ |
| If required would you be able to undertake country travel given appropriate notice?  Yes **❑** No **❑**  Occasionally **❑**  Rarely **❑** | Will you be able to work outside of normal hours, on a rotating after hours on-call roster (approx. every seven weeks)  Yes **❑** No **❑** |

**PERSONAL INFORMATION:**

|  |  |
| --- | --- |
| SURNAME | GIVEN NAMES |
| ADDRESS: | |
| HOME TELEPHONE NO: | MOBILE TELEPHONE NO: |
| EMERGENCY CONTACT NAME: | EMERGENCY CONTACT PHONE NO: |
| EMAIL ADDRESS: | |
| DATE OF BIRTH: |  |
| ARE YOU AN AUSTRALIAN CITIZEN: YES ❑ NO ❑  IF NOT, DO YOU HAVE PERMANENT RESIDENCY? YES ❑ NO ❑ If yes, provide evidence | |
| Driving Licence: Do you hold a full (without restrictions), driving license valid for Australia YES ❑ NO ❑ | |
| Drivers Licence Number: Type: Car / MR / HR / Other  State Issued: (circle) VIC / NSW / QLD / TAS / SA / WA / ACT / NT | |
| Do you have a current Working with Children’s Check Card YES ❑ NO ❑ If yes, provide a copy | |

**WORK EXPERIENCE:**

|  |  |  |  |
| --- | --- | --- | --- |
| ORGANISATION | POSITION TITLE | DATES OF EMPLOYMENT | \*REFERENCE AVAILABLE? |
|  |  |  | YES ❑ NO ❑ |
|  |  |  | YES ❑ NO ❑ |
|  |  |  | YES ❑ NO ❑ |
|  |  |  | YES ❑ NO ❑ |

\*Reference contact details may be requested post interview.

**EDUCATION & TRADE SKILLS:**

|  |  |  |  |
| --- | --- | --- | --- |
|  | SCHOOL/COLLEGE/TAFE | DURATION OF STUDIES | DEGREE/CERTIFICATE OBTAINED |
| Secondary |  |  |  |
| Tertiary/Professional |  |  |  |
| Training Courses |  |  |  |
| Other Trade Skills |  |  |  |
|  |  |  |  |

**LICENCE DETAILS:**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Licence Type | Licence Number | Class Held | Accreditation No. | Expiry Date |
|  |  |  |  |  |
|  |  |  |  |  |

**PHYSICAL REQUIREMENTS OF THE POSITION**

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| --- |
| This position involves the following physical requirements:   * Ability to stand, bend, and crouch for extended periods. * Fabrication welding (arc, tig and mig). * Working from heights. * Working in hot and cold conditions. * Working in noisy conditions. * Dexterity using tools in tight spaces. * Lifting, carrying, holding, pushing or pulling heavy and/or bulky items * Driving a manual vehicle and forklift. * Working around livestock. * Working alone on the “on-call” roster. |

**DISCLOSURE OF ANY PRE-EXISTING INJURIES/DISEASES**

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| --- |
| Have you any pre-existing injuries/diseases which could impact on your ability to carry out the requirements of the position? If yes, please provide details: |
| Note: In accordance with the *Workplace Injury Rehabilitation and Compensation Act 2013* (Vic), failure to disclose information regarding pre-existing injuries or diseases may result in the worker not being entitled to WorkCover compensation for that particular injury or disease in the event of reoccurrence, aggravation, acceleration, exacerbation or deterioration of the condition. |

**APPLICATION DECLARATION:**

* I hereby affirm that all information given by me in this application for employment is true and correct and that I have not knowingly withheld any circumstances or facts that would, if disclosed, affect my application.
* I confirm that I have read and understood the Position Description which is available on the Westfalia Warragul website.
* I understand that if I give a false or misleading answer to any question on this application form, I will, if accepted for employment, be liable for disciplinary action which may include immediate dismissal without notice.
* If required I am prepared to undertake any medical examination by a doctor nominated by Westfalia Warragul and allow them to conduct any criminal record search. A medical examination may include drug and alcohol testing, in accordance with our Drug & Alcohol Management Policy.

Applicant’s Signature.......................................................................................... Date: ............................................................

**PRIVACY:**

The information requested on this application for employment is necessary to ensure a fair and thorough evaluation of all applicants. Personal information contained within this form shall be available only to employees and managers of the company with direct involvement in the recruitment process.