**APPLICATION FOR EMPLOYMENT**

DATE SUBMITTED:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

POSITION(S) APPLIED FOR:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

TYPE OF EMPLOYMENT SOUGHT: FULL-TIME / PART-TIME / CASUAL

(PLEASE CIRCLE)

Were you referred by a current staff member?

Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

# PERSONAL DETAILS

GIVEN NAMES: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

SURNAME:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

RESIDENTIAL

ADDRESS:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_P/CODE:\_\_\_\_\_\_\_\_\_\_\_\_\_

PHONE:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ EMAIL:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Are you an Australian Citizen? YES / NO (PLEASE CIRCLE)

IF NO:

Do you have valid working rights in Australia? YES/NO (PLEASE CIRCLE)

**PLEASE BE ADVISED**: It may be a requirement for your employment to have a National

Police Check / VISA Check completed. If you have a criminal history this will show up in the National Police Check or alternatively if your VISA is invalid, this also will be evidenced. You need to be aware that negative responses may impact on your application’s success.

It also may be a requirement for ongoing employment with the Club that regular National Police Checks / VISA Checks may be obtained of all employees.

Completion and submission of this application form to Kedron-Wavell means you are aware of this requirement, you give permission to have the relevant checks carried out and you agree to sign the necessary paperwork to facilitate this occurring.

Refusal to comply with this provision subsequent to engagement will be considered serious misconduct and may result in immediate termination of your employment.

# AVAILABLITY

Kedron-Wavell is open until 3.00am every day of the week. As the Community Club Industry operates on a seven-day basis, you may be required to work some evenings, weekends and public holidays based on rotating rosters.

What hours are you available work?

Monday \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Friday \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Tuesday \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Saturday \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Wednesday\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Sunday \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Thursday \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

# YOUR HEALTH AND WELL BEING AND WORKERS’ COMPENSATION HISTORY

Are there any medical issues / factors / pre-existing injuries or medical conditions that may impact your ability to perform your required duties safely?

YES / NO (PLEASE CIRCLE)

If you answered yes to the above question, please provide details: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Do you suffer from a medical condition/s that may require the Club to obtain special knowledge and / or training to protect your health and safety (i.e. asthma, diabetes, etc)?

YES / NO (PLEASE CIRCLE)

If you answered yes to the above question, please provide details: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

It is a requirement of your employment at the Club that you provide a detailed disclosure of any pre-existing injury / injuries or medical condition/s and consent to the Club making an application to the Workers’ Compensation Regulator to obtain full details of your Workers’ Compensation history. Failure to comply with these requirements including making a false or misleading disclosure may result in your application for employment being rejected and / or your employment terminated.

**EMPLOYMENT HISTORY**

Please list your last 2 employers with your most recent employer first. Please note if you are successful, a HR representative will contact the listed reference.

EMPLOYER (COMPANY NAME): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

REFERENCE NAME: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

REFERENCE PHONE NO.: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

POSITION: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**2.**

EMPLOYER (COMPANY NAME): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

REFERENCE NAME: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

REFERENCE PHONE NO.: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

POSITION: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

# EXPERIENCE

Please tick (✓) if you have any experience in any of the following areas:

|  |  |  |  |
| --- | --- | --- | --- |
| Administration |  | First Aid |  |
| Bar |  | Functions |  |
| Bingo |  | Gaming |  |
| Bistro/Food Service |  | Keno |  |
| Cashier |  | TAB |  |
| Storeperson/Cellar |  | Management |  |
| Chef |  | POS Systems |  |
| Cook |  | Promotions |  |
| Kitchen |  | Reception |  |
| Barista |  | Childcare |  |
| Customer Service |  | Driving a Bus |  |

# EDUCATION & TRAINING

Do you possess any of the following Certificates?

Responsible Service of Alcohol YES / NO (PLEASE CIRCLE)

Responsible Service of Gambling YES / NO (PLEASE CIRCLE)

Food Handlers Certificate YES / NO (PLEASE CIRCLE)

Blue card YES / NO (PLEASE CIRCLE)

Please list any other qualifications you possess which are relevant to the Club and/or hospitality industry:

Name of Institution \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Qualification & Date Completed \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**DECLARATION**

Kedron-Wavell will only use your personal information for the purpose of assessing your application for employment. If your application is successful, this information will be transferred across to the HR information system. The information we collect from you will be handled sensitively and securely with proper regard for your privacy. If you do not provide some of the personal information we request when you apply for a position with Kedron-Wavell, we may not be able to process your application. We may contact referees, whose details are provided by you, as part of our standard recruitment process.

I have read the above declaration and fully understand the terms specified.

I hereby certify that the above information is true and correct and complete to the best of my knowledge and belief and consent to the Club pursuing a National Police Check / VISA

Check, employment reference checks and an application to the Workers’ Compensation Regulator to obtain full details of my Workers’ Compensation history.

Date: \_\_\_\_/\_\_\_\_/\_\_\_\_ Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_