

NEWSPOWER



CONFIDENTIAL

Date of Application:

Position applied for:

Full Time

Part Time

Casual

Retail

Distribution

Family Name:

(MR/MRS/MISS/MS)

Given Names:

Date of Birth:

Current address:

Postcode:

Telephone Home:

Email address:

Mobile:

Are you legally allowed to work in Australia?

Yes

No

Have you any objection to a Police Record Check?

Yes

No

When could you start?

What Days & Hours are you available to work?

Total

Hours :

Available	Mon	Tues	Wed	Thur	Fri	Sat	Sun
From							
To							

EDUCATION (most recent first)

Secondary/Tertiary/Trade Technical	Year from/to	Qualifications achieved

EMPLOYMENT DETAILS (most recent first)

Name/Address of Employer	Period of Employment from/to	Position and duties	Reason for leaving

REFERENCES

(I consent to any reference checks that may be necessary to support this application)

(Sign Here please)

Name of referee	Title	Company/organisation	Contact phone number

GENERAL

Do you have any specialised knowledge or skills: (Eg. Computers/retail sales)	
Do you have any hobbies or interests:	
I would like to work at Traralgon Newspower because...	
My best customer service experience was when...	
My worst customer service experience was when...	
List any additional information relevant to your application:	

MEDICAL HISTORY

Do you know of any medical reason why, if appointed, you would be unable to carry out the full requirements of the position? If so please give details:

Do you have any pre-existing illness or injury, which could be affected by the work duties described in the job description? Yes No If so please give details:

Do you have a current Driver's License? Yes No

Do you have Vehicle Insurance? Yes No

FURTHER COMMENTS:

Traralgon Newspower is a smoke-free environment.

APPLICANT'S STATEMENT

I declare that all information provided by me in this application is true and to the best of my knowledge and I realise that a false statement could result in my immediate dismissal. I understand and agree that the terms and conditions of my employment shall be in accordance with the appropriate industrial award or agreement and undertake to observe all of the company's rules and/or regulations as issues from time to time that are applicable to me. I also agree to an initial probation period of 12 weeks.

Signed: _____

Witnessed: _____