



**EMPLOYMENT APPLICATION**

What position are you applying for:

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone Daytime: \_\_\_\_\_ Mobile: \_\_\_\_\_

Email: \_\_\_\_\_

**Current qualifications**

Qualification title	Institution/training provider	Year completed

**Previous employment (most recent first)**

Employer name/ establishment	Dates from/to	Position held	Reason for leaving	Office use check initial/date

Do you agree to have references contacted in relation to this application? (tick one)  Yes  No

*(Reference checks will be conducted legally in an ethical manner and all information derived will remain confidential.)*

Please provide details of three people who can speak on your behalf regarding your work history.

Name	Contact No.	Position held/working relationship (eg supervisor)	Office use check initial/date

What type of work are you available for? (tick one) Full time  Part time

When will you be available for work? \_\_\_\_\_



Please provide any other information that you identify as being pertinent to this application  
(eg medical conditions, disabilities)

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**Declaration**

I declare that, to the best of my knowledge, the information given is true and correct. I understand that inaccurate, misleading or untrue statements or knowingly withheld information may result in termination of employment with this organisation. I understand that this application does not constitute an offer of employment. I understand that, in some cases, police and credit checks will be required and I will be notified if this applies to this application.

Signed:

Date:

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