**Application for Employment**

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| **Position Applied For** |  |

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| **Personal Details** | |
| **First Name** |  |
| **Last Name** |  |
| **Address** |  |
| **Phone No** |  |
| **Email** |  |

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| **Educational/ Trade Qualifications** | | |
| **Dates To & From** | **Schools, colleges and universities attended** | **Qualifications attained and major area of study** |
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| **Current Employment**  (If unemployed at present, show details of previous position) | |
| **Employer Name** |  |
| **Title of Position** |  |
| **Reporting to** |  |
| **Dates** | **From: To:** |

|  |  |  |
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| **Referees**  (People whom we may contact) | | |
| **Referee Name** | **Contact No** | **Organisation** |
| 1. |  |  |
| 2. |  |  |
| 3. |  |  |

Do you have any pre-existing medical conditions and/or injuries? Yes  No

If yes, please state

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Do you have any allergies? Yes  No

If yes, please state

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Are you an Australian Citizen? Yes  No  If no,

Are you a permanent resident? Yes  No  If no,

Do you have a Visa? Type: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Expiry: \_\_\_\_\_\_\_\_\_\_\_\_\_

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| **Document Required** | **Check** |
| Resume (CV) |  |
| Entitlement to Work in Australia / Passport / Birth Certificate or Visa |  |
| Queensland Drivers License |  |
| Vehicle Registration |  |
| Vehicle Insurance |  |
| Qualifications – minimum Certificate III In Individual Support |  |
| First Aid – Current and within the 12 months |  |
| Blue & Yellow Card/ Worker Screening Check |  |
| 100 Points ID – If you do not have a current Blue Card |  |