



# Application for Vacancy Form

## Important Notes

1. No late applications will be accepted.
2. All applicants are advised to address the selection requirements as stated in the advertisement and/or the job application kit eg work related requirements (selection criteria)

<b>Vacancy Details</b>	<b>Position Title</b>				<b>Position Number</b>						
	<b>Division</b>				<b>Classification Level</b>						
<b>Personal Details</b>	<b>Surname</b>		<b>Given Names</b>			<input type="checkbox"/> Mr	<input type="checkbox"/>	Mrs	<input type="checkbox"/>	Miss	
						<input type="checkbox"/> Ms	<input type="checkbox"/>	Dr			
	<b>Home Address</b>					<b>Telephone</b>					
						Home					
						Work					
	Email					Mobile					
	<b>Equal Opportunity Information</b> The following optional information is for equal opportunity reporting purposes:										
	Age Range: <20 <input type="checkbox"/> 20-25 <input type="checkbox"/> 26-30 <input type="checkbox"/> 31- 35 <input type="checkbox"/> 36-40 <input type="checkbox"/> 41-45 <input type="checkbox"/> 46-50 <input type="checkbox"/> 51-55 <input type="checkbox"/> 56-59 <input type="checkbox"/> >60 <input type="checkbox"/>										
	Are you of:		<input type="checkbox"/>	Aboriginal descent	<input type="checkbox"/>	Torres Strait Islander descent		<input type="checkbox"/>	Both		
	What is your country of birth?				What is the main language spoken at home?						
	Are you from a culturally diverse background (born outside Australia in a country whose main language is NOT English) <input type="checkbox"/> Yes <input type="checkbox"/> No										
<b>Address for Notification</b>	<b>Postal Address if different to Home Address</b> (Please do not designate your work place as the address for notification)										
<b>Recruitment Source</b>	<b>How did you first become aware of this vacancy?</b>										
	<input type="checkbox"/>	Department of Corrective Services Website		<input type="checkbox"/>	Seek or CareerOne (please specify)		<input type="checkbox"/>	The West Australian			
	<input type="checkbox"/>	The Australian		<input type="checkbox"/>	The Sunday Times		<input type="checkbox"/>	Other			
	<input type="checkbox"/>	Flyer/Notice Board (please specify)		<input type="checkbox"/>	Information Session		<input type="checkbox"/>	Jobsearch			
	<input type="checkbox"/>	Personal contact/word of mouth		<input type="checkbox"/>	Radio		<input type="checkbox"/>	Expo (please specify)			
	<input type="checkbox"/>	Govt Job Board		<input type="checkbox"/>	Community Newspaper (Metro)		<input type="checkbox"/>	Community Newspaper (Regional)			
	<b>Details:</b>										
<b>Citizenship and Residency</b>	Permanent Residency is a pre-requisite for appointment to permanent staff. Non-permanent residents who have a working visa are eligible for fixed term appointments.										
	Are you an Australian citizen or permanent resident?				<input type="checkbox"/>	Yes	<input type="checkbox"/>	No Please provide the relevant information:			
	1. Date applied for permanent residency?						/			/	
	2. Type of visa and expiry date?						/			/	
	As a condition of employment you maybe required to undergo formal verification of your right to work in Australia from the Department of Immigration Multicultural and Indigenous Affairs.										
	Will you consent to such screening?				Yes		<input type="checkbox"/>	No		<input type="checkbox"/>	



<b>Current Public Sector Employment</b>	Are you currently employed within the West Australian State Government? If so, please give details:		<input type="checkbox"/>	No	<input type="checkbox"/>	Yes	
	Employment status:	<input type="checkbox"/>	Permanent	<input type="checkbox"/>	Fixed Term	<input type="checkbox"/>	Casual
	Current level:		Expiry date of your fixed term contract:			/	
<b>Previous WA Public Sector Employment</b>	Have you received a voluntary severance payment from the WA Public Sector? Yes <input type="checkbox"/> No <input type="checkbox"/>						
	If yes, which Department?						
	Period of Severance:		/		/		
	Have you previously been employed with the Department of Corrective Services, Department of the Attorney General or Department of Justice?				No <input type="checkbox"/>	Yes <input type="checkbox"/>	
	If yes, for what period?		/		/		
	Employee Number?						
	Eligibility requirements to be checked by the Employment Section – Eligible?				Yes <input type="checkbox"/>	No <input type="checkbox"/>	

## Declarations

The following declarations are NOT a barrier to being considered for employment but will assist us to take due care in assessing appropriate placement should you be the successful applicant.

<b>Health</b>	To the best of your knowledge and belief, are you of sound health? <input type="checkbox"/> Yes <input type="checkbox"/> No <i>Please provide details:</i>	
<b>Workers' Compensation Claim</b>	Have you ever made a claim(s) for Workers' Compensation? <input type="checkbox"/> No <input type="checkbox"/> Yes <i>Please provide details</i>	
	Date of Claim	<input type="text"/> / <input type="text"/> / <input type="text"/> Is the claim still current? <input type="checkbox"/> Yes <input type="checkbox"/> No
	<i>Details:</i>	
	Date of Claim	<input type="text"/> / <input type="text"/> / <input type="text"/> Is the claim still current? <input type="checkbox"/> Yes <input type="checkbox"/> No
	<i>Details:</i>	
<b>Criminal Records Screening</b>	Do you have any current convictions for any offences from any court, or are you currently the subject of any charge pending before any court (excluding any convictions which you have had declared spent)? <input type="checkbox"/> Yes <input type="checkbox"/> No	
	The Department requires as a condition of employment, that you undergo formal Criminal Records Screening.	
	Will you consent to such screening? <input type="checkbox"/> Yes <input type="checkbox"/> No	
	Applicants identified as working in child-related work, as defined by the <i>Working with Children (Criminal Record Checking) Act 2004</i> require Working with Children Checks.	
	Will you consent to such screening? <input type="checkbox"/> Yes <input type="checkbox"/> No	

I acknowledge by submitting this application that I am declaring all statements in the application to be true in all respects. I acknowledge that any statement which is found to be false or deliberately misleading will make me, if employed, liable for dismissal.

\_\_\_\_\_  
Signature

/  /   
Date



<b>Checklist for Applicants</b>	<input type="checkbox"/>	Application for Advertised Vacancy Form (including acknowledgement slip if required) is completed and attached to application
	<input type="checkbox"/>	Have adhered to the requested limitation of documents submitted (ie if stated no more than 2 pages to be submitted ensure that is all that is included in the application)
	<input type="checkbox"/>	Application addresses the required selection questions as indicated in the job advertisement/application package, if applicable
	<input type="checkbox"/>	Current Resume is attached
	<input type="checkbox"/>	Copy of current working visa (if applicable) is attached
	<input type="checkbox"/>	Entered your details for return of the Acknowledgement Slip
	<input type="checkbox"/>	Additional <b>requested only</b> information in support of the application is attached – please do not provide originals. Do not include copies of certificates/awards unless requested to do so.

<b>Acknowledgement slip for hand delivered applications only – (To be completed by the applicant)</b>		
This is to confirm that the Department of Corrective Services has received your application for position number: _____		
Although every effort is taken to complete the selection process in a timely manner, at times delays can occur. If you need to check on the progress of the selection process please contact the person nominated in the advertisement.		
<b>Name:</b>	<input type="text"/>	(Please do not designate your work area as the address for notification)
<b>Address:</b>	<input type="text"/>	
	<input type="text"/>	
	<input type="text"/>	
	<b>P/Code</b>	