



Parliament of Western Australia

The information contained in this form is confidential and details will not be divulged to any person outside the selection process without the applicant's authority.

The form should be completed fully and signed at the bottom of the second page.

Application For Employment Form

Advertised Vacancy Details	Position Applied For:
	Department/Unit:

Personal Details	Surname:	Mr <input type="checkbox"/>	Miss <input type="checkbox"/>	Mrs <input type="checkbox"/>
		Ms <input type="checkbox"/>	Dr <input type="checkbox"/>	Other <input type="checkbox"/>
	Other Names:			
	Preferred Name (if different to Above):			
	Address:	Telephone Numbers:		
		Mobile:	Home:	
	Email Address:			
	Are you an Australian Citizen or permanent resident of Australia?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	

Recruitment Source	Where did you see this vacancy advertised?
	Parliament Web Site <input type="checkbox"/> WA Jobs Board <input type="checkbox"/> Seek <input type="checkbox"/> Other <input type="checkbox"/>

Business Referees (Two Required)	Referee One
	Name of Referee:
	Referee's Position:
	Relationship:
	Company:
	Address:
	Email:
	Telephone: W:
	M:
	Referee Two
Name of Referee:	
Referee's Position:	
Relationship:	
Company:	
Address:	
Email:	
Telephone: W:	
M:	
<i>Referees will not be contacted without the applicant's permission and the applicant will be advised prior to checks being carried out. Current or previous immediate supervisors are required, where possible.</i>	

Employment Present or Last Position	Company:
	Address: Post Code:
	Position Title: Responsible to:
	Key responsibilities (list key duties)
	1. 2. 3. 4. 5.
Employed from: To:	
Why are you applying for this position?	
When are you available to commence?	

Public Sector Employment Only	1. Are you currently employed in the West Australian Public Sector? <input type="checkbox"/> Yes <input type="checkbox"/> No
	2. Please indicate your employment status: Permanent <input type="checkbox"/> Casual <input type="checkbox"/> Contract <input type="checkbox"/>

Health information	<i>A medical condition, disability or injury is NOT a barrier to the potential offer of employment in the Parliament of Western Australia. However, to assist in assessing opportunities for placement, please indicate whether you have any limitations likely to affect your work performance or that requires special consideration/needs.</i>
	Injury <input type="checkbox"/> Disability <input type="checkbox"/> Medical Condition <input type="checkbox"/> Yes - If yes, please provide details:
	No <input type="checkbox"/>

Criminal Convictions	Do you have any criminal convictions for any offences from any court, or are you currently the subject of any charge pending before any court? Yes - If yes, please provide details:
	No <input type="checkbox"/>
	<i>You do not need to give details for any conviction which you have declared spent (West Australian Spent Convictions Act 1988). If rejection of your application is considered solely because of a criminal record, you will be given the opportunity to discuss this matter fully before a final decision is made.</i>

Declaration	I declare the above statements to be true in all respects. I acknowledge that any statement that is found to be false or deliberately misleading will make me, if employed, liable for dismissal.
 Signature of Applicant Date

Applicant Checklist	<input type="checkbox"/> Application for Employment Form is completed and attached to application. <input type="checkbox"/> Statement addressing the Selection Criteria in the Job Description Form is attached to application. <input type="checkbox"/> Current Resume is attached to application. <input type="checkbox"/> Additional information in support of the application is attached - please do not provide originals.
----------------------------	---