## **Application Form**

## Senior Ministerial Liaison Officer - 14025

## **Applicant Personal Details**

Title		
		Last Nome
First Name Middle Name	25	Last Name
Preferred Name		
Phone (Day Time)	Phone (Mobile)	
Email		
Email Consent		
Yes, I understand and agree that the email address	supplied above will be used fr	or all correspondence
	supplied above will be used it	
Postal Address		
Address 1		
Address 2		
Suburb Town State	Postcode	Country
Employment Details		
Are you currently employed in the WA public sect	ior?	
Yes No		
If yes, please specify Agency	Classification L	_evel
Award		
Have you ever received a voluntary severance from the WA public sector?		

Yes No

If yes, what is your re-entry date on your Deed of Severance