



APPLICATION FOR ADVERTISED VACANCY

ADVERTISED VACANCY DETAILS	Position Title:		Position No:	AV:
	Level:	Branch:	Division:	

PERSONAL DETAILS	Title:	Surname:	Given Names:	
	Mailing Address:			Post Code:
				State:
	Phone No (Preferred):		Phone No (Alternate):	
	Email Address:			
In submitting this application I understand and agree that the email address supplied may be used for all correspondence				

EMPLOYMENT DETAILS	Are you currently employed in the West Australian Public Sector?		Yes <input type="checkbox"/>	No <input type="checkbox"/>
	If yes, are you permanent or on contract?		Permanent <input type="checkbox"/>	Contract <input type="checkbox"/>
	Have you ever received a voluntary severance payment from the West Australian Public Sector?		Yes <input type="checkbox"/>	No <input type="checkbox"/>
	If yes, What is your re-entry date on your Deed of Severance:			
	Substantive Position (do not list acting positions)	Department:		
Position Title:				
Award & Classification:				

REFEREE 1	Title:	Surname:	Given Names:	
	Department or Organisation:			
	Phone:		Email:	

REFEREE 2	Title:	Surname:	Given Names:	
	Department or Organisation:			
	Phone:		Email:	

RESIDENCY DETAILS	Are you an Australian Citizen or permanent resident of Australia?			Yes <input type="checkbox"/>	No <input type="checkbox"/>
	If no, do you have a visa that allows you to live and work in Australia?			Yes <input type="checkbox"/>	No <input type="checkbox"/>
	If yes, please provide the following details:	Visa Expiry Date:		Date of Birth:	
		Passport Number:		Issuing Country:	
	Please include any visa information as an attachment to this application.				

The following are not barriers to employment. To assist in assessing opportunities for employment please answer the following questions and if you answer yes, please provide further information.

HEALTH/WORKER'S COMPENSATION CLAIMS	Have you ever made a claim for Worker's Compensation? If "Yes", please provide details	Yes <input type="checkbox"/> No <input type="checkbox"/>
	Details:	
	Do you, to the best of your knowledge, have a medical condition that may preclude you from undertaking the duties of this position? If "Yes", please provide details	Yes <input type="checkbox"/> No <input type="checkbox"/>
	Details:	
CRIMINAL CONVICTIONS	Do you have any current criminal convictions for any offences from any court, or are you currently the subject of any charge pending before any court? If "Yes", please provide details	Yes <input type="checkbox"/> No <input type="checkbox"/>
	Details:	
	You do not need to give details for any conviction which you have had 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 the matter fully before a final decision is made.	

RECRUITMENT SOURCE	Where did you see this vacancy advertised?	DPC/PSC Internal Email <input type="checkbox"/>	The West Australian <input type="checkbox"/>
		WA Job Board <input type="checkbox"/>	Seek <input type="checkbox"/>
		Community Newspaper <input type="checkbox"/>	Other <input type="checkbox"/>

The following information is requested for statistical purposes only. If you do not wish to answer please leave the question blank.

DIVERSITY INFORMATION	Gender	Male <input type="checkbox"/> Female <input type="checkbox"/> Other <input type="checkbox"/>
	Date of Birth:	/ /
	Are you of Aboriginal or Torres Strait Islander Origin	Yes <input type="checkbox"/> No <input type="checkbox"/>
	Do you have an ongoing disability?	Yes <input type="checkbox"/> No <input type="checkbox"/>
	Do you speak a language other than English at home?	Yes <input type="checkbox"/> No <input type="checkbox"/>

NOTIFICATION	I would like to receive email notification that my application has been received:	Yes <input type="checkbox"/> No <input type="checkbox"/>
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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:	Date:

CHECKLIST FOR APPLICANTS	Application form is completed and attached to application	Copies of relevant qualifications are attached
	Application addresses the selection criteria/work requirements	Copy of current working visa is attached
	Current Resume is attached	Additional information in support of the application is attached