Application for: Cook Pool Ref 00005460, WA Country Health Service

Applicant Questions	
Integrity Check Have you worked within WA Health in the past?	Tick your response(s) () Yes () No
If you answered yes to the above question please be advised that WA Hea there has been no previous record of miscounduct.	Ith undertakes an Integrity Check on all new employees to ensur
Criminal Record Screening It is Department of Health policy that all employed out by the Department of Health and the cost is borne by the employee.	ees undergo criminal record screening. The screening is carried
Eligibility for Employment To be eligible for a permanent appointment to the Western Australian public sector it is essential that you are an Australian citizen or have permanent residency status in Australia. To be eligible for a fixed term appointment you must have documentary evidence of your entitlement to live and work in Australia for the period of the contract. Eligibility for sponsorship may be considered for some vacancies. You are encouraged to discuss this with the contact person listed in the advertisement. Are you an Australian citizen or permanent resident?	Tick your response(s) () Yes () No
If you answered No to the above question, please provide further details h	nere:

Worker (Restrictions on Access) Directions (Directions), and the

Directions , unless the employee is exempt pursuant to the Directions. Please complete the relevant section below regarding your COVID-19 $\,$

Remote Aboriginal Community Worker (Restrictions on Access)

vaccination status.

Aboriginality Are you an Australian Aboriginal or Torres Strait Islander?	Tick your response(s) () No () Yes, Aboriginal () Yes, Torres Strait Islander () Yes, both Aboriginal and Torres Strait Islander
Advertising Survey To assist the Health Support Services in improving our recruitment and selection processes, can you please indicate where you found out about this position?	Tick your response(s) () WA Health Jobs Board (www.jobs.health.wa.gov.au) () WA Jobs Board (www.jobs.wa.gov.au) () Google () Yahoo () LinkedIn () Seek/My Career/Career One () Other Website () Job Opportunities (HCN Intranet) () Word of Mouth () Noticeboard Advert () The West Australian Newspaper () The Australian Newspaper () Community Newspaper () Regional Newspaper () Other Newspaper () Other Newspaper () Professional Journal () Newsletter () WA Health "Global" Advert
Do you consent to participating in a survey or providing feedback to assist us in improving our recruitment and selection service.	Tick your response(s) () Yes () No
Additional Information Applications for advertised vacancies are assessed ag applicants is prepared. Applicants selected for further consideration will be not vacancy notice. Applicants who are not shortlisted will be notified of the result process.	stified after the closing date for applications stated in the job
Applicants for advertised vacancies are to ensure their referees are aware the	ney may be contacted.
Vaccination Status All Mental Health Commission employees are required to be fully vaccinated against COVID-19 in order to access community care facilities, pursuant to the Community Care Services	Tick your response(s) () I have received my COVID-19 booster vaccination () I am fully vaccinated against COVID-19

() I am partially vaccinated against COVID-19

() I do not intend to be vaccinated

() I am exempt from receiving the COVID-19 vaccination and/or COV

() I am seeking an exemption from receiving the COVID-19 vaccination

() I am not yet vaccinated but I intend to be vaccinated in line with the

Vaccination Status All WA health system employees are required to be fully vaccinated against COVID-19 (including the booster vaccination when they are eligible) in order to access health care facilities, pursuant to the Health Worker (Restrictions on Access) Directions (HWD) (or its replacement), COVID-19 Mandatory Vaccination and Vaccination Program Policy, and the Booster Vaccination (Restriction on Access) Directions (BVD) (or its replacement), unless the employee is exempt pursuant to the HWD and BVD. Additionally, if an employee is working in a residential aged care facility, they must comply with the Residential Aged Care Facility Worker Access Directions No 4 (or its replacement). Please complete the relevant section below regarding your COVID-19 vaccination status.

rick your	response(s)	
) I have re	acaived my CC	N/ID-10 hoosto

- () I have received my COVID-19 booster vaccination
- () I am fully vaccinated against COVID-19
- () I am partially vaccinated against COVID-19
- () I am exempt from receiving the COVID-19 vaccination and/or CO () I am seeking an exemption from receiving the COVID-19 vaccina
- () I am not yet vaccinated but I intend to be vaccinated in line with the
- () I do not intend to be vaccinated

Vaccination Status As this occupation is based in a public healthcare facility, the successful candidate is required to be fully vaccinated against COVID-19. This requirement is pursuant to the Community Care Services Worker (Restrictions on Access) Directions . Please complete the relevant section below regarding your COVID-19 vaccination status.

Tick your response(s)

- () I have received my COVID-19 booster vaccination
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- () I am exempt from receiving the COVID-19 vaccination and/or COV
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Application Attachments To now attach your documentation, please select the "NEXT" key at the end of this page, and follow the instructions on the next screen.

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Application Attachments The next screen will ask you for any attachments to your application. Examples of these include a resume, curriculum vitae (CV), a statement against the selection criteria, etc. Please ensure that you are now ready to attach these documents and state the number of pages in each document, separated as below: Eg. 1x5, 2x6 (meaning 5 pages in the first attached document, and 6 pages in the second attached document.) Please enter amount of pages per attachment here:

Signature

By submitting this application I am declaring all statements in the application to be true and correct, to the best of my knowle
at the time it was submitted. I acknowledge that the information I am providing will be relied on in assessing my application
if I am appointed to this position, any significant information that is found to be false or misleading may make me liable for
disciplinary action including possible dismissal.