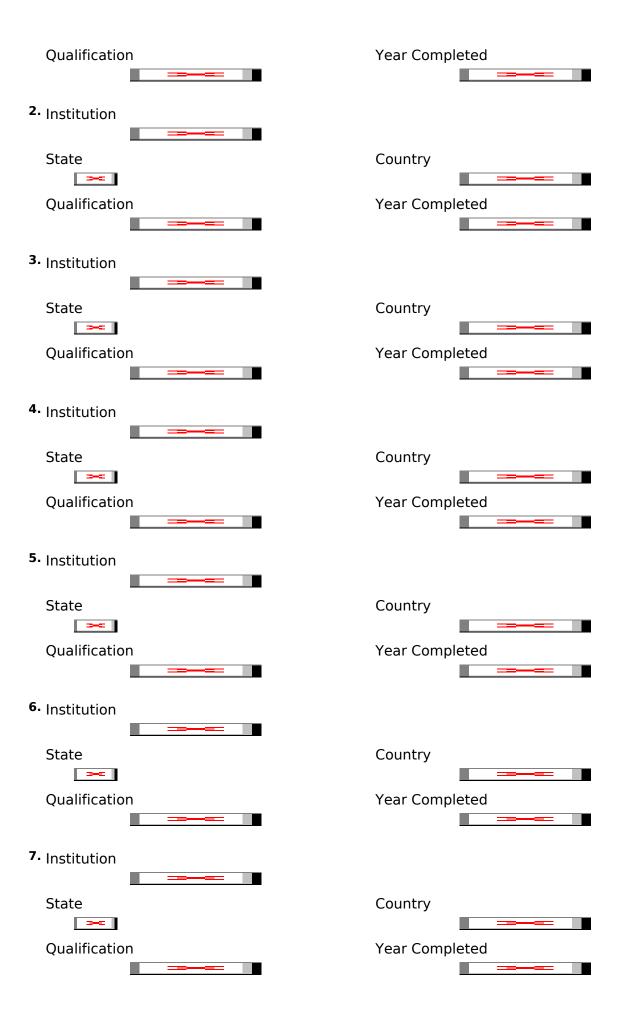
Application Form

Fundraising Manager - 15014

Applicant Personal Details		
Title Dr Miss Mr Mrs Ms Professor First Name Middle Names	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 for all correspondence		
Postal Address		
Address 1		
Address 2		
Suburb Town State	Postcode Country	
Education		
1. Institution		
State	Country	
Qualification == == ==	Year Completed	
2. Institution		
State	Country	



Employment Details

Are you currently employed	in the WA public sector?
Yes No	
lf yes, please specify Agenc	y Classification Level
Award	
Have you ever received a v	oluntary severance from the WA public sector?
If yes, what is your re-entry	date on your Deed of Severance
Details of Curre	nt Position
Date of Employment - Start	
Organisation	Position Title
Work Type	
	Permanent - Full Time 🕱 Casual 🔻 Sessional 🔻 Other
Fixed Term - Part Time	Permanent -Part Time
Main Duties	