

EMPLOYMENT APPLICATION FORM

This application form must be completed as accurately as possible. It is essential for the processing of your application for employment that all questions are answered.

Each applicant accepts that by completion of this form a guarantee of employment is not given.

POSITION APPLIED FOR: _____

Are you seeking full time / part time / casual employment? (please circle)

If part time, preferred number of hours per week _____

SURNAME: _____ FIRST NAMES: _____

ADDRESS (RESIDENTIAL) _____

_____ POST CODE: _____

POSTAL ADDRESS (if different from above) _____

_____ POST CODE: _____

TELEPHONE: _____ AFTER HOURS: _____ D.O.B. _____

Are you legally entitled to work in Australia? Yes / No

Do you have any physical disabilities or medical conditions which would affect your ability to do the job?
If yes, give details.

Will you agree to undergo a medical examination if requested? Yes / No

EDUCATION

QUALIFICATION	NAME OF ESTABLISHMENT	LEVEL ACHIEVED	DATE COMPLETED

AUTHORIZATION TO OBTAIN PREVIOUS EMPLOYMENT/EDUCATION INFORMATION

In completing this Application I also authorize any of my previous Employers listed above or Educational Institutions so listed in connection with my past employment history and training, to give information regarding my period of employment, nature of my duties, performance assessments, character reference, pre and exit medical assessment information; and reasons for leaving, to a management representative of Krueger Engineering upon request. I also authorise any person from my past Employers/Educational Institutions to provide this information upon receipt of a clear reproduction of this authority. I understand that once this authorization is given I cannot withdraw or revoke this authority for the duration of my application/employment with Krueger Engineering Pty Ltd.

DECLARATION BY APPLICANT

I declare and agree that:

- a) The answers given in this application are to the best of my knowledge, true and correct in every way.
- b) If my application for employment is successful I will be bound by and will at all times observe and respect the terms and conditions of employment and such policies and rules as may from time to time be published, specified or otherwise stipulated by Krueger Engineering Pty Ltd.
- c) I understand that any false declaration made by me in this application subjects me to dismissal or other disciplinary action.
- d) I understand that if my application is successful, my employment is subject to a satisfactory medical report.
- e) Full authorization is given to obtain previous employment history data.

NAME (PRINT CLEARLY) _____

SIGNATURE OF APPLICANT _____

DATE _____

FOR OFFICE USE ONLY

Applicant information verified

Referees contacted

Unsuccessful

Place on file

Interview

Interview Date _____ Time _____ Location _____

Interviewer _____

Other positions for which applicant may be suitable _____