

Application for Advertised Vacancy



Complete this form in full and attach to the front of your application.

Position your Applying For:

APPLICANT DETAILS

Surname:

Given Name/s:

Contact Number:

Email:

Residential Address:

Postal Address:

Drivers Licence Number:

Expiry:

State:

Licence Class:

C R RE MR LR HR HC MC *Please attach a copy of your current driver's licence*

Are you an Australian citizen or Australian Permanent Resident? Yes No

Do you have a current working visa? *If yes, please provide a copy.* Yes No

HOW DID YOU HEAR ABOUT THIS VACANCY

- Esperance Weekender SEEK
 Shire of Esperance Website Council Direct
 Facebook Other (*please specify*) _____

REFEREES

Please provide details of two current or previous direct line supervisors or managers that we may contact to confirm details of your previous employment.

Name:

Contact Number:

Organisation:

Position Held:

Name:

Contact Number:

Organisation:

Position Held:

HEALTH

To assist in assessing opportunities for your placement in appropriate employment, please advise whether you have a health condition that may affect your ability to undertake the inherent requirements of the role?

- A health condition is not an automatic barrier to employment with the Shire of Esperance Applicants who have a health condition are invited to discuss its relevance to the position with Human Resources on (08) 9071 0642.
- Please note that all new employees will be required to undergo drug and alcohol testing prior to being offered employment with the Shire.
- Please note that a pre-employment medical assessment may be requested.
- Some positions will require the applicant to be fully vaccinated against COVID-19.

Do you have an underlying health condition? *If yes, please provide details below:* Yes No

COVID-19 Vaccination Status:

1st Dose 2nd Dose Booster Exempt *If vaccinated, please provide a copy of your certificate.*

POLICE CLEARANCE

Please note that offers of employment with the Shire of Esperance may be subject to applicants providing a satisfactory National Police Clearance prior to commencement.

CHECKLIST

Have you:

- | | |
|--|--|
| <input type="checkbox"/> Completed this application form in full | <input type="checkbox"/> Provided contact details for at least two work-related referees |
| <input type="checkbox"/> Provided a copy of your resume | <input type="checkbox"/> Provided a photocopy of your current Driver's Licence |
| <input type="checkbox"/> Provided a copy of your vaccination certificate | <input type="checkbox"/> Addressed the selection criteria listed in the position description |

DECLARATION

I declare that all the above statements and attached supporting documents are true in all respects. I acknowledge that any statement which is found to be false or deliberately misleading will make me, if employed, liable for dismissal.

Signature

Applicant

Date

Submit your completed application form and resume to the CEO:

- By hand: 7 Windich Street, Esperance;
- By post: PO Box 507, Esperance WA 6450, or
- By email: employment@esperance.wa.gov.au

OFFICE USE ONLY

Date Received:

TRIM Ref:

Application Acknowledged