Application Form - Blank

**A. PRACTICE APPLICATION FORM FROM A MAJOR RETAILER**

**MAJOR RETAILER IS "An Equal Employment Opportunity Employer"**

**APPLICATION FOR EMPLOYMENT**

**Personal details**

Family name: Other name(s): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Post code: \_\_\_\_\_\_\_\_\_

Telephone (BH): ­­­­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (AH):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Availability**

Our stores are open 7 days per week. Please indicate the hours in each day that you would be available to work.

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| MON | TUES | WED | THURS | FRI | SAT | SUN |
| 7am - 7pm | 7am - 7pm | 7am - 7pm | 7am - 9pm | 7am - 9pm | 7am - 5pm | 9am - 4pm |

Are you available and willing to work part-time? (Part-time = 12.32 hours per week) Yes No

If yes, what is the maximum number of hours you are able to work per week?

If you are successful in gaining a position with MAJOR RETAILER, how much notice would you require before being able to start? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Employment History**

* Please detail your work history, specifying whether full-time, part-time, casual, voluntary or work experience, listing your most recent employer first. Please attach your resume (if available).

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **EMPLOYER** | **POSITION TITLE**  (and type —  for example  full-time/part-time) | **ROLE DESCRIPTION** (key responsibilities) | **DATES OF SERVICE** | **REASON FOR**  **LEAVING** |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

Please do not hesitate to attach further information if necessary.

* Have you ever been employed by MAJOR RETAILER or any subsidiary of MAJOR RETAILER? If so, what, where, and when was your most recent position?

|  |
| --- |
|  |
|  |
|  |

* Have you previously been interviewed for employment with MAJOR RETAILER? If yes, when?

|  |
| --- |
|  |

**Further information**

* What is the highest level of schooling you have achieved and in what year? (For example —Year 10, 11, 12, University degree and so on). Please mention any current study.

|  |
| --- |
|  |
|  |

* Please list any trade or other professional qualifications, licences, certificates or other accredited skills that you have gained (show dates).

|  |
| --- |
|  |
|  |

* Have you completed any training relevant to retail industry? If yes, please specify.

|  |
| --- |
|  |
|  |

* Have you completed any other training courses (such as first aid, personal development)? Please list these and the dates completed.

|  |
| --- |
|  |
|  |
|  |

* Please list any computer systems, software or hardware you have used (including point of sale).

|  |
| --- |
|  |
|  |

**More about yourself**

* What is it that attracts you to work with MAJOR RETAILER?

|  |
| --- |
|  |

* What interests do you have?

|  |
| --- |
|  |
|  |

* Please describe an achievement you are particularly proud of (such as employment, education or personal achievement) **and why?**

|  |
| --- |
|  |
|  |
|  |

* Describe a situation when you were involved with **a)** customer service (if you have relevant experience) OR ***b)*** working with other people

|  |
| --- |
|  |
|  |
|  |

* What did you enjoy about the experience?

|  |
| --- |
|  |
|  |
|  |

* What did you least enjoy?

|  |
| --- |
|  |
|  |
|  |

* Are you an Australian citizen, or are you legally entitled to work permanently in Australia? Yes No

**References (work/study /related)**

Please list two (paid or unpaid) work or study related referees and their contact details. Do not supply personal or family referees. (if you have any issues regarding confidentiality, please mention this at the time of the interview, as we will not be contacting referees prior to this time).

**NO. 1 NO. 2**

Referee: Referee:

Telephone: Telephone:

Position: Position:

Company: Company:

**I declare that all information given in this application is true and correct.**

**Signature: Date:**

**B. PRACTICE APPLICATION FORM — GENERAL**

**CONFIDENTIAL APPLICATION FOR EMPLOYMENT**

Position applied for: Date:.

Interviewing officer:

Dept. Tour required: yes/no Medical required: yes/no

Surname: Other names:

Private address:

Telephone: Private: ………………Business: ……….……..…. Mobile: ……..……………………….

Date of birth: Present age:

Are you a permanent resident of Australia? yes/no

Emergency contact: Telephone:

Address:

…………………………………………………………………………….Post code:

Do you have any hobbies or participate in sport, club, church or community activities?

|  |
| --- |
|  |
|  |

**Education**

|  |  |  |  |
| --- | --- | --- | --- |
| **Level** | **Name of School/College** | **Years to — from** | **Achieved** |
| Secondary |  |  |  |
| Tertiary |  |  |  |
| Other |  |  |  |
| Current |  |  |  |

**Employment**

Please complete the following showing the present employment first:

|  |  |  |  |
| --- | --- | --- | --- |
| **Company name** | **Dates to — from** | **Duties** | **Reason for leaving** |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

Do you have any current part-time employment?If yes, give details

|  |
| --- |
|  |
|  |

If required to use a motor vehicle, do you hold a driver's licence? YES NO

Do you have a particular career ambition? YES NO

If yes, give details

|  |
| --- |
|  |
|  |

Do you have an illness or injury that may affect your ability to perform this job?

|  |
| --- |
|  |
|  |

Have you ever had a Workers' Compensation claim? If yes, give details.

|  |
| --- |
|  |
|  |

What particular skills do you possess which you feel are relevant to this position?

|  |
| --- |
|  |
|  |

Should you be offered this position, what qualities will you bring with you to the job?

|  |
| --- |
|  |
|  |

Why do you feel you are the best person for the job?

|  |
| --- |
|  |
|  |

If successful, when are you available to start work?

|  |
| --- |
|  |

**Referees**

Name: Name:

Position: Position:

Company: Company:

Telephone: Telephone:

Applicants Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**C. PRACTICE APPLICATION FORM FROM A CHARITABLE / AID ORGANISATION**

**This sample includes referee contact details and selection criteria are also included.**

**Instructions Regarding Application**

**(please read prior to completing the form)**

* Please complete this application form and return to (address and email address provided) Please DO NOT attach CVs, references or any other documentation unless indicated on the form.
* This form is designed to promote equal employment opportunity (job selection based on merit). The front sheet of this form, including references, will be detached for the first stage of

selection.

**Eligibility to work in Australia is a requirement of this position.**

**Are you an Australian resident or holder of an appropriate work visa?** YES NO

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Post code \_\_\_\_\_\_\_\_\_

Telephone (day) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Telephone (A/H) ­­­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Contactable at work? ❑Yes ❑No

E-Mail \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Optional Questions**

You are not required to provide details about age, gender or ethnicity, however this information will assist the agency with evaluation of responses to advertising and job descriptions.

Gender ❑Female ❑Male

Age ❑Under 30 ❑30 to 45 ❑Over 45

Ethnicity ❑ Anglo/ Australia ❑ Indigenous Australian

❑ Asian/Australian ❑ Other/Australian

❑ Other/Non-Australian

Where did you hear about this position?

❑Newspaper

❑Job Network

❑Organisations Website

❑Contact with organisation

❑Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Office Use Only Application Number :**

Please list at least two professional referees. Wherever possible, referees should be current, preferably your most recent supervisors/managers, and be able to provide information on your appropriateness for the position.

**Referee number 1**

|  |  |
| --- | --- |
| Referee Name: |  |
| Relationship to this person: |  |
| Current Telephone: |  |
| Current email address: |  |

**Referee number 2**

|  |  |
| --- | --- |
| Referee Name: |  |
| Relationship to this person: |  |
| Current Telephone: |  |
| Current email address: |  |

**Referee number 3**

|  |  |
| --- | --- |
| Referee Name: |  |
| Relationship to this person: |  |
| Current Telephone: |  |
| Current email address: |  |

**Referee number 4**

|  |  |
| --- | --- |
| Referee Name: |  |
| Relationship to this person: |  |
| Current Telephone: |  |
| Current email address: |  |

Office Use Only Application Number :

**Position applied for**

1. **Why does the position interest you?**
2. **Have you previously applied for a position with organisation's name.**

❑ No ❑ Yes - please list position(s) and date applied below

1. **Have you been involved with community organisations?**

❑ No ❑ Yes - please briefly detail relevant community involvement

1. **Education/Qualifications**

|  |  |  |
| --- | --- | --- |
| **COURSE/SUBJECT STUDIED** | **QUALIFICATION OBTAINED** | **YEAR(S)** |
|  |  |  |
|  |  |  |
|  |  |  |

1. **Employment history (please detail relevant wmployment including your last three positions.**

|  |  |
| --- | --- |
| Employer: | Position: |
| From: | To: |
| Brief Description of Duties: | |

|  |  |
| --- | --- |
| Employer: | Position: |
| From: | To: |
| Brief Description of Duties: | |

|  |  |
| --- | --- |
| Employer: | Position: |
| From: | To: |
| Brief Description of Duties: | |

|  |  |
| --- | --- |
| Employer: | Position: |
| From: | To: |
| Brief Description of Duties: | |

**6. Please attach details on how you meet the selection criteria for this post.**

Extensive customer service experience

Experience of computer receipting or database entry work?

1. **Typing Skills**

What is your current typing speed?   
When were you last tested?

Would you be prepared to be tested? ❑Yes ❑No

1. **Please outline any other skills, knowledge or experience you feel would be relevant to this position.**

|  |
| --- |
|  |
|  |
|  |
|  |