



FM-G2-1.6-17 - Human Resource Management – Employment Application Form

PART A

Last Name: _____ First Name/s: _____ (Mr/Mrs/Miss/Ms)

Date of Birth: ____/____/____ Telephone (Home): _____ (Mobile): _____

Residential Address: _____

Postal Address: _____

Email: _____

PART B

Position applied for: (if Other, please list) _____ Preferred Site: GSL KG

RN EN AIN Cook Cleaner Maintenance Admin Allied Health Other

Australian Citizen: Yes No If 'No' a copy of your Visa is required (Please attach).

Are you seeking: Full time Part time Casual Other: _____

Do you have a current Drivers Licence? Yes No Do you have a current Police Check? Yes No

Shift Availability Please tick (This is not a guarantee that you will be rostered these shifts)

DAY	SHIFTS AVAILABLE		
	Morning ie 6.00 am to 3.15 pm	Afternoon ie 2.30 pm to 11.00 pm	Night (AIN, EN & RN Staff Only) ie 10.45 pm to 7.15 am
Monday			
Tuesday			
Wednesday			
Thursday			
Friday			
Saturday			
Sunday			

Comments:

PART C



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Please list formal qualifications relevant to the position or attach a copy of a Resume:

Institution	Qualifications Obtained	Dates

PART D – EMPLOYMENT HISTORY

For Nursing positions please attach Record of Hours from previous employers to ensure correct pay rate is processed.

CURRENT EMPLOYER	POSITION HELD	DATES
PREVIOUS EMPLOYER/S	POSITION HELD	DATES

Names, Company, Position and Contact Numbers of two referees from whom confidential reports may be obtained:

1. _____
2. _____

PART E – PRE EXISTING CONDITIONS

Do you have any history of physical or mental illness which may affect your capacity to perform the role or, which by performing the role, might put you at risk? **Yes No If yes please provide details.**

PART F

Other relevant experience or skills:

How did you hear about this position? Newspaper Seek Friend/Family Employee Dropped off Resume
Other: _____

Please note: A Resume will need to be supplied to gain employment (Please attach).

I certify that the information given in this Employment Application is true and correct and I understand that providing any false or misleading information is a serious offence and may result in termination of employment.

Signed: _____ Date: _____