

APPLICATION FOR CASUAL POOL

POSITION DETAILS:

Position Advertised:	Casual Pool		
Please select the position/s you are interested in applying for:			
Cleaner			
□ Administration / Cus	tomer Service		
□ Parks and Gardens			
□ Road / Plant Operati	ion		
Please view the attached Position Description for further information and detail on the role required.			
Date:		Reference:	

PERSONAL DETAILS:

Title:	🗆 Miss 🗆 Mr 🗆 Mrs 🗆 Ms		
Surname:		Given Name/s	
Residential Address:			
Town:		Postcode:	
Postal Address:			
Town:		Postcode:	
Daytime Phone:		Alternative Phone:	
Email Address:			
Are you a permanent resident of Australia, or have you been granted permanent residency?		Do you hold a valid WA Driver's Licence?	
☐ Yes ☐ No (If no, please attach copy of a Visa validating permission to work in Australia)		□ Yes, Class Type	: 🗆 No
	xisting injuries, medical conditions or disa npact your capacity to fulfil the requireme		
Have you previously m	ade a workers' compensation claim? □ `	Yes □ No	
If yes to either, please detail below and indicate if there are any special accommodations that you may require to ensure your work environment is suitable.			
(Note: Pre-existing con process or be a barrier	ditions or workers' compensation claims to employment.)	will not exclude poten	tial candidates from the recruitment



Do you hold a current Police Clearance (within 3 months) or would you be willing to provide if required? Yes No

A criminal record does not necessarily disqualify an applicant. If rejection of your application is considered solely because of a criminal record, you will be given the opportunity to discuss the matter fully before a final decision is made.

Are you aware of any restrictions / limitations to your availability that may potentially impact any scheduling for casual appointments? Please provide detail below.

EMPLOYMENT HISTORY (please list most recent first):

Employer / Business Name	Dates	Position Held	Description of main duties



EDUCATION / QUALIFICATIONS:

Qualification / Licence	Institution / Training Provider	Year completed

REFEREES:

We recommend that you select the most recent referees that can confirm your work experience and competencies most relevant to the position you are applying for. All information gained from conducting referee checks will remain confidential.

Referee 1 Name:	
Relationship to you:	
Phone:	
Email Address:	

Referee 2 Name:	
Relationship to you:	
Phone:	
Email Address:	

FURTHER INFORMATION:

Please provide any further information below that may be relevant to your application:



APPLICANT DECLARATION:

- 1. I certify that the information contained in this application is to the best of my knowledge and belief, accurate and current in every detail, with no impending issues or claims apparent that may affect consideration of this application or the requirements of any position for which I am applying.
- 2. I understand that Council reserves the right to verify all information on this application and that any false or misleading statement will be considered sufficient cause for the application to be rejected, or for immediate dismissal if appointed.
- I understand that Council's recruitment and selection procedure involves a pre-employment medical examination by a Council approved medical centre, at Council's expense, and that original results of this examination are required to be disclosed to this organisation.
- 4. I understand that my application is for the Casual Pool only and my details may be kept on file for future use (unless otherwise advised). Should I wish to be considered for an advertised position at the Shire of Mingenew, outside of the Casual Pool, I will be required to follow the advertised requirements for that role to be eligible.

Applicant Signature	Date	