

Application for Employment (Please handwrite this application)

DATE		Po	SITION APPLIED	For:		
TITLE	Mr 🗆	Mrs	Ms	Miss		
Last I	NAME:			FIRST NAME:		
STREE	T Address:					
Subu	RB:				P/0	CODE:
PHON	E: (H)			(M)		
EMAII	L:					
A RE Y	OU AN A USTRA	alian Citizen:	YES	No	See box b	pelow
Have	e you been g	ranted a temporary	Visa/Work Per	mit:	Yes 🗌 No 🗌	Please attach photocopy See Note below
						dency or a temporary visa/work permit, ork in Australia can be provided.
Havo	vou applio	d for employment	with Montag	u hoforo?	∕os □ No l	П
						
-						
<u>Plea</u>	ise submit t		<u>m with your</u> history and o			ng your education and employment
lmn	ortant Ir	nformation	instory una c	<u> </u>	<u>aunjieurie</u>	<u>.</u>
1.	All support		ired to have	the ability t	o drive org	anisational vehicles (including vans)
	Do you hold	a valid Driver's Licence	e? Yes 🗆	No		
2.	If you are a preferred candidate after interview, it is a requirement that a Working with Vulnerable Persons Registration Card (for work purposes) be obtained.					
	Do you have	a valid registration?	Yes 🗆	No		
3.		a preferred candid nt Health Assessm	-	-	a requirem	ent that you attend a Pre-
		sults of this assessmer	-			ory, does not automatically exclude you from

4. The expe	ectation is that you are willing to wo	rk a combination of any of the fol	lowing shifts:
	Early morning		
	Short (2-4hr)		
	Day		
	Afternoon/Evening		
	Sleepovers		
	Split (am & pm)		
	Public Holidays		
Please select y	your availability by placing a tick in the box other non-availal	next to the specific shift and use the spa pilities or commitments	ce below to discuss any
	Note: Your availability wi	ll also be discussed at interview	
Do you h personal Yes □	erest Statement: have any conflict of interest in working any conflict of interest in working and relationship with an employee or set and No No results of this are kept confidential and doesew.	rvice user?	
misleading or u	o the best of my knowledge, the informantrue statements or knowingly withheld n. I understand that this application doe	information may result in terminatio	n of employment with
Signature:		Date:	/ /
		Return Address:	Montagu Community Living PO Box 452 or 1 Bowen Road Moonah TAS 7009
		Contact:	(03) 6278 7599 : T

(03) 6278 7199 : F admin@mcl.org.au: Ewww.mcl.org.au: W