

Job application form

(insert organisation / logo)

| | | | | |
|--|------------------------------------|--|--|--|
| Position Applied for | | | | |
| Personal Details | | | | |
| Surname | | Given name | | |
| Preferred | | | | |
| Address | | | | |
| Work phone | | Home phone | | |
| Mobile phone | | | | |
| Email | | | | |
| Current Qualifications | | | | |
| Qualification title | Institution/Training provider | | Year completed | |
| | | | | |
| | | | | |
| | | | | |
| Are you currently undertaking study/training? (tick one) | | | Yes <input type="checkbox"/> No <input type="checkbox"/> | |
| Course/program name | | | | |
| Full-time <input type="checkbox"/> | Part-time <input type="checkbox"/> | Online <input type="checkbox"/> | Other <input type="checkbox"/> | |
| Previous Employment (Most Recent First) | | | | |
| Employer name/establishment | Dates from/to | Position held | Reason for leaving | |
| | | | | |
| | | | | |
| | | | | |
| References | | | | |
| Do you agree to have referees contacted in relation to this application? | | | <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| Reference checks will be conducted legally in an ethical manner and all information gained will remain confidential. | | | | |
| Please provide details of three people who can speak on your behalf regarding your work history and job performance. | | | | |
| Name | Contact number | Position held/working relationship (for example. supervisor) | | |
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For more information on this topic, refer to **Chapter 2. Attract, Recruit and Select** of *Your Workforce – a guide for Northern Territory Employers*.

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|---|------------------------------------|------------------------------------|---------------------------------|
| Position Applied for | | | |
| What type of work are you available for? (tick one) | Full-time <input type="checkbox"/> | Part-time <input type="checkbox"/> | Casual <input type="checkbox"/> |
| Other Information | | | |
| When will you be available to start work? | | | |
| Please provide any other information that you identify as being pertinent to this application? (for example, medical conditions, disabilities) | | | |
| Are you aware of any factors that will impact or prevent you from performing the inherent requirements of the job role? | Yes <input type="checkbox"/> | | No <input type="checkbox"/> |
| If Yes, please provide details or discuss during interview. | | | |
| Declaration | | | |
| I declare that to the best of my knowledge the information given is true and correct. I understand that inaccurate, misleading or untrue statements or knowingly withholding information may result in termination of employment with this organisation. I understand that this application does not constitute an offer of employment. I understand that, in some cases, police and credit checks will be required and I will be notified if this applies to this application. | | | |
| Signed | | Date | |

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