



IDC CONTRACTING PTY LTD

APPLICATION FOR EMPLOYMENT

Name: _____

Date of Application: _____

Position Applied for: (1) _____

(2) _____

Location of position: _____

IMPORTANT NOTES

- Please complete this application in your own handwriting and complete all sections and you must sign the back page disclaimer.
- The information requested is necessary to allow us to process your application.
- Information provided to us will be treated in accordance with the Privacy Sector Regulations (2006).

Please note:

1. Information will be provided to you on request, however that the Company does not retain records relating to unsuccessful applicants.
 2. Information requested is required to assess your suitability for the position and will be provided to Company employees on a need to know basis.
 3. Information provided may be supplied to third parties assisting in the selection process.
 4. Any queries you might have should be addressed to the person nominated in the advertisement.
 5. If information where requested is not provided we will be unable to process your application.
- As part of your Application for Employment you will be required to complete a Health Assessment Questionnaire and to have a physical assessment.
 - The position you have applied for may/will involve direct handling and operating of machinery. It is critical that all questions are answered fully and accurately. This is to ensure there is no risk to your own health and safety or to the health and safety of others.

Employment Application Form

APPLICANT INFORMATION							
Last Name			Given Names				
Street Address							
Suburb / Location			Postcode		State		
Phone			Mobile				
E-mail Address							
Date Available			Desired Salary				
What period of notice do you require prior to commencement?							
Are you a citizen of Australia?		YES	NO	If no, are you authorised to work in Australia?		YES	NO
Have you ever worked for IDC Contracting Pty Ltd?		YES	NO	If so, when?			
Are you aware of any friends or relatives working at IDC Contracting Pty Ltd now or previously?					YES	NO	
If yes, provide details:							
Are you prepared to work overtime?		YES	NO				
Languages: English?		YES	NO	Other:			
How did you hear about vacancies at IDC Contracting Pty Ltd?							

EDUCATION					
HIGH SCHOOL ATTENDED:					
From:	To:	Did you graduate?	YES	NO	Grade / Level:
UNIVERSITY / TERTIARY ATTENDED:					
From:	To:	Did you graduate?	YES	NO	Degree:
OTHER:					
From:	To:	Did you graduate?	YES	NO	Degree:
OTHER:					
From:	To:	Did you graduate?	YES	NO	Degree:

PREVIOUS EMPLOYMENT

The information supplied must cover at least 5 years of employment until now. A resume with the appropriate details as required may suffice.

Company:				Phone: ()			
Address:				Supervisor/Manager:			
Job Title:							
Description of work and duties performed:							
From:		To:		Reason for leaving:			
May we contact your previous employer for a reference?				YES		NO	
Company:				Phone: ()			
Address:				Supervisor/Manager:			
Job Title:							
Description of work and duties performed:							
From:		To:		Reason for leaving:			
May we contact your previous employer for a reference?				YES		NO	
Company:				Phone: ()			
Address:				Supervisor/Manager:			
Job Title:							
Description of work and duties performed:							
From:		To:		Reason for leaving:			
May we contact your previous employer for a reference?				YES		NO	
Company:				Phone: ()			
Address:				Supervisor/Manager:			
Job Title:							
Description of work and duties performed:							
From:		To:		Reason for leaving:			
May we contact your previous employer for a reference?				YES		NO	
Company:				Phone: ()			
Address:				Supervisor/Manager:			
Job Title:							
Description of work and duties performed:							
From:		To:		Reason for leaving:			
May we contact your previous employer for a reference?				YES		NO	

DISCLAIMER AND SIGNATURE

I (print name) _____ declare

- a) That the answers to the forgoing are, to the best of my knowledge, true and correct in every particular.
- b) That if my application for employment is successful I will be bound by and at all times observe and respect such terms and conditions of employment and such policies and rules as may from time to time be promulgated, specified or otherwise stipulated by my employer.
- c) That I have no objections to the Company practice of transferring their employees from site to site where necessary.
- d) I fully understand that I must comply with the regulations of the Occupational Health and Safety Act.
- e) That I have understood that I will be subject to discharge for cause of falsifying information this or any employment documents which relates to qualification on other factors affecting the employment decision.
- f) I fully understand that is a condition of my employment that necessary safety equipment and footwear are worn at all times.
- g) I fully understand that it is a condition of my employment that all safety rules, as issued by the company, will be observed.
- h) I fully understand that it is a condition of my employment that I will undergo a medical examination at company expense if required.

Signature:		Date:	
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OFFICE USE ONLY

Job Title 1:					
Data Base Entry	YES	NO	Date:		
Pre-employment medical assessment conducted?			FIT FOR DUTY	<input type="checkbox"/>	UN-FIT FOR DUTY <input type="checkbox"/>
Date:			By whom:		
Comments:					
Proof of name/age must be verified to one to two of:			Licences / Tickets required and provided for position applied for:		
Driver's Licence	<input type="checkbox"/>		Plant Operator	<input type="checkbox"/>	
Birth Certificate	<input type="checkbox"/>		Crane Operator	<input type="checkbox"/>	
Other	<input type="checkbox"/>		Truck Licence	<input type="checkbox"/>	
Other	<input type="checkbox"/>		Other	<input type="checkbox"/>	
Employed By:			Manager Approval:		
Commencing Date:			Pay Rate:		
Classification:			Employed as:	Permanent <input type="checkbox"/>	Casual <input type="checkbox"/>
Vehicle:	Company Car <input type="checkbox"/>	Car Allowance <input type="checkbox"/>	Pay Method:	Salary <input type="checkbox"/>	Overtime <input type="checkbox"/>
Fuel Card	YES	NO	Tax Form:	YES	NO
Mobile Phone	YES	NO	Bank / Super Form:	YES	NO