Application for Employment

Shire of West Arthur PO Box 112 31 Burrowes Street Darkan WA 6392 T: (08) 9736 2400 SHIRE OF STATES

E: shire@westarthur.wa.gov.au

Thank you for your interest in this position with the Shire of West Arthur. Please complete the following questions and attach with your application.

Vacancy Details							
Position Title:							
(Circle applicable) Permanent / Temporary / Part-time / Casual							
Personal Details							
Surname:			Title: ☐ Mr ☐ Mrs ☐ Ms ☐ Miss				
Given Names:		Date of Bi	Birth:				
Postal Address:							
Suburb:		Postco	ode:				
Email:							
Daytime Contact Nu	ımber:	Mobi	oile:				
Are you an Australia	a Citizen or permanent resident of A	ustralia?	☐ Yes ☐ No If no,				
	Id a Visa allowing you to work in Au	stralia?	☐ Yes ☐ No				
(If yes, please attach a copy) Do you hold a current Motor Vehicle Driver's License? (If yes, please provide details)			☐ Yes ☐ No				
State:	Class(es):	Number:	Expiry:				
Do you hold a current: National Police Clearance Working with Childrens Check							
OR \square willing to obt	ain clearance/s.						
Recruitment Source	es						
How did you first be	ecome aware of this vacancy?						
\square Shire of West Arthur website]	☐ Other website				
\square Local Government Jobs website]	\square Local newspaper				
☐ WA Govt Jobs website]	☐ West Australian				
☐ Word of mouth		[☐ Other				

Please ensure you have attached all the required documents (see <i>Information for Prospective Applicants</i> for details).							
\square Cover Letter		☐ Resume/Curri	☐ Resume/Curriculum Vitae				
☐ Referees (2 contactable work referees, preferably supervisors or managers)		☐ Copies of rele	ant qualifications				
Availability							
How soon would you be able to commence work? (If currently employed, what is the minimum period of notice required?)							
Declarations							
To the best of your knowledge to undertake the duties of the Yes No If "yes", please provide detai	e position you applied for		that would impact your ability				
ii yes , pieuse provide detai	is or condition.						
Workers' compensation claim	n						
Have you ever made a workers compensation claim?							
Have you ever made a worker	rs compensation claim?						
Have you ever made a worker ☐ Yes ☐ No	rs compensation claim?						
☐ Yes ☐ No If "yes", please describe claim	·	ury, what type of injury, com	pany worked for, period off				
☐ Yes ☐ No	·	ury, what type of injury, com	pany worked for, period off				
☐ Yes ☐ No If "yes", please describe claim	·	ury, what type of injury, com	pany worked for, period off Period off work				
☐ Yes ☐ No If "yes", please describe clain work, etc.):	n details (e.g., year of inj						
☐ Yes ☐ No If "yes", please describe clain work, etc.):	n details (e.g., year of inj						
☐ Yes ☐ No If "yes", please describe clain work, etc.):	n details (e.g., year of inj						
☐ Yes ☐ No If "yes", please describe claim work, etc.): Year of injury	n details (e.g., year of inj						
☐ Yes ☐ No If "yes", please describe claim work, etc.): Year of injury Are any claims still current?	Type of injury Yes No						
☐ Yes ☐ No If "yes", please describe claim work, etc.): Year of injury	Type of injury Yes No						
☐ Yes ☐ No If "yes", please describe claim work, etc.): Year of injury Are any claims still current?	Type of injury Yes No						
☐ Yes ☐ No If "yes", please describe claim work, etc.): Year of injury Are any claims still current?	Type of injury Yes No						

	Criminal Convictions						
	Have you ever been convicted of any offence in any court, or are you currently subject to any charges pending before court, or the subject of an investigation before a tribunal? (You do not need to give details of any conviction which you have had declared spent under the "Spent Convictions Act 1988".)						
	☐ Yes ☐ No						
	If "yes", please provide details:						
	Applicant Declaration						
I declare that all the above statements and attached supporting information are true in all respects and consent that this information will be stored and used for the purposes of assessing suitability for employment. I understand that in providing referees I consent to them being contacted. I acknowledge that any statement which is found to be false of deliberately misleading will make me, if employed, liable for dismissal. (If submitting a hard copy, please sign and date. If emailing, please enter your name and date, we will consider this consent as describe above.)							
	Applicants signature: Date:						