
APPLICATION FOR EMPLOYMENT

This application is to be completed by the applicant and ALL sections MUST be answered.

I _____ hereby make an

application for employment as:

- CARPENTER**
- LABOURER**
- APPRENTICE / TRAINEE**
- OTHER** _____

Office Use Only

Position _____

Classification _____

Start Date _____

Initial Job Location _____

APPROVAL TO COMMENCE GIVEN BY: _____ __/__/__

SIGNATURE



ALL INFORMATION PROVIDED IS STRICTLY CONFIDENTIAL

PERSONAL DETAILS

Form with fields for Surname, Given Names, Home Address, Suburb, State, Post Code, Home Phone No., Mobile Phone No., Date of Birth, and Email.

IDENTIFICATION

Form with fields for Driver's License No., OR Passport No., OR Identity Card No., and checkboxes for permanent resident status and Aboriginal/Torres Strait Islander origin.

SKILLS & QUALIFICATIONS

Table with 3 columns: TICKET / QUALIFICATION / SKILL, YES / NO, and NUMBER. Rows include Industry Induction Card, Trade Ticket Type, Forklift, Dogman, Rigger, Scaffold, Telehandler Ticket, EWP, Confined Space, Manual Handling, Working at Heights, First Aid, Traffic Control, Welder, Tower Crane, Truck License, and Other.



TRADES CHECKLIST

- Are you a Tradesman ? Yes No

If Yes, please specify the name of your Trade

- **Carpenters Only** (Please tick the areas in which you have had experience)

Formwork Years of experience

Ticketed

Non Ticketed

Cottage Years of experience

Shop Fitting Years of experience

Commercial Years of experience

Fitting Out Years of experience

- **Other Trade** Years of experience



EMPLOYMENT HISTORY

Details of your last three employers are required below. If you have not been in employment for the past five years please state the reason why.

1. Name of Employer:

Nature of Business: Position Held:

Start Date: Date Terminated:

Duties & Responsibilities:
.....

Reason for leaving employment:

Contact Person: Telephone Number:

2. Name of Employer:

Nature of Business: Position Held:

Start Date: Date Terminated:

Duties & Responsibilities:
.....

Reason for leaving employment:

Contact Person: Telephone Number:

3. Name of Employer:

Nature of Business: Position Held:

Start Date: Date Terminated:

Duties & Responsibilities:
.....

Reason for leaving employment:

Contact Person: Telephone Number:



DECLARATION OF EMPLOYMENT

**READ CAREFULLY PRIOR TO
SIGNING THIS APPLICATION !**

The information I have supplied is true and accurate. I give permission for Wideform Pty Ltd to contact past employers for the purpose of checking references.

I have completed this application fully and accurately and have not withheld any material information.

I understand that the Application process involves:

- Employment Application Form (this form)
- Interview Process
- Pre Employment Medical
- Reference Check

If I were to be successful with this application, I acknowledge that I may be subject to instant dismissal if:

- **It is found that I have given false or misleading information at any stage during the application process**

and / or

- I do not comply with the Company's Policies, including following safe procedures of work, correct use of all safety equipment and the wearing of suitable personnel protective equipment, clothing and footwear.

I also understand that if I were to obtain employment with Wideform Pty Ltd, I will be on a probationary period of 4 weeks prior to being formally accepted as an employee of the company.

Name:

Signature: Date:/...../.....

Name of Witness:

Signature: Date:/...../.....

(Or person assisting in completing form)