



## CONFIDENTIAL APPLICATION FOR EMPLOYMENT

If you are attaching a Resume/Curriculum Vitae, it is not necessary to complete Sections B & C.

### PLEASE NOTE:

1. This application is suitable for applicants applying for either advertised employment vacancies OR wishing to express interest in future employment opportunities.
2. Copies of current qualifications must be attached to this application.
3. The application, when complete in full, can be mailed to the attention of the HR Manager c/o PO Box 500 Manly NSW 1655 or faxed to 9976 3711 or scanned and emailed with relevant attachments to [jobs@aquaticleisuremanagement.com.au](mailto:jobs@aquaticleisuremanagement.com.au)
4. Any acceptance and subsequent appointment is subject to proof of eligibility to work in Australia.
5. Any statement on this form which is found to be deliberately misleading will make you, if employed, liable for dismissal.

### SECTION A – PERSONAL DETAILS

DATE OF APPLICATION: ..... TYPE OF APPLICATION: (circle) Advertised Position OR Expression of Interest

POSITION TITLE APPLIED FOR: (list) .....

ADVERTISED LOCATION: (circle) Mosman Bankstown North Rocks OR

LOCATION INTERESTED IN: (circle) Mosman Bankstown North Rocks

AVAILABILITY TO COMMENCE: (date).....

SURNAME: ..... GIVEN NAME: .....  
(Preferred form of address: Mr / Mrs / Ms / Miss (Circle whichever applicable))

HOME ADDRESS: .....

..... POST CODE: .....

#### TELEPHONE NUMBERS:

Home: ..... Mobile: ..... Business: .....

Fax: ..... E-mail: .....

DRIVERS LICENCE NUMBER: ..... EXPIRY DATE: .....

CAR REGISTRATION: .....

If not an Australian or New Zealand Citizen, do you have a Working visa? ..... (Copy is required)

Passport number:.....

Visa number: ..... Expiry date: .....

Where did you see or hear about us? (Please tick)

- Local Newspaper .....  Friend/relative  
 Internet (Indicate Website).....  Other (please indicate).....

**SECTION B – EDUCATION**

**1. SECONDARY** (Show details of highest examination passed or attempted or attach copy of Certificate)

NAME OF EXAMINATION: Year 10 Year 11 Year 12

**2. TERTIARY**

Name of Institution	Course Undertaken	From	To	QUALIFICATIONS AWARDED <i>(Please attach copies of your results)</i>

**3. OTHER SKILLS AND QUALIFICATIONS**

You may include professional/technical qualification, courses, fluency in languages, office skills, computer skills  
**Please attach copies of your current license or certification**

Certification	Registration Number	Date Obtained	Expiry Date

Professional Membership(s):  
 .....  
 .....

**SECTION C – EMPLOYMENT HISTORY**

Please indicate where you have worked before. Include overseas as well as Australian work experience. Voluntary work experience may also be included.

If space provided is insufficient and you wish to provide a more detailed work history, please attach extra pages to this form.

EMPLOYER	DATES		POSITION HELD
	From	To	

**SECTION D – OTHER**

Would you be willing to undertake country or interstate travel as required?.....

Do you speak, read or write any languages other than English?.....  
 If so, which ones? .....

Is there any other information which you would like to include in support of your application for employment?  
 .....  
 .....  
 .....

**SECTION E – AVAILABILITY**

**Please indicate any times you are available to work with Aquatic Leisure Management:**

*(Please tick the boxes to indicate availability):*

**During School/ Uni Term:**

Date School/ Uni commences: \_\_\_/\_\_\_/\_\_\_      Number of hours available for work: \_\_\_\_\_

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Morning							
Midday							
Afternoon							

***If you have a copy of your uni/tafe/college timetable, please provide.***

**During School/ Uni Holidays:**

Date School/ Uni Holidays commence: \_\_\_/\_\_\_/\_\_\_      Number of hours available for work: \_\_\_\_\_

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Morning							
Midday							
Afternoon							

**Current & Future Commitments:**

Please indicate the approximate length of commitment you are prepared to offer if employed (circle):

**1-6 months                                  6-12 months                                  12-24 months                                  24 months +**

Please indicate any commitments such as sport, music, study or other employment, which will prevent you from working on specific days/ times.

Day(s): \_\_\_\_\_

Times: \_\_\_\_\_

Dates of Commitment: From \_\_\_/\_\_\_/\_\_\_ to \_\_\_/\_\_\_/\_\_\_

Please indicate the dates of any holidays you have planned: From \_\_\_/\_\_\_/\_\_\_ to \_\_\_/\_\_\_/\_\_\_

Is this Holiday already booked?      Yes      No

Other notable items which may affect your availability:

.....

.....

.....

.....

**SECTION F – MEDICAL**

Do you have any health problems or a medical condition that may affect your ability to perform the requirements of the position [as specified above or in the position description attached to this application?]

If so, please provide the details: .....

Would you agree to undergo a medical examination to assess your suitability to be able to carry out the requirements of the position? .....

If you have a disability, please indicate how the workplace might be adjusted to overcome any barriers that may affect your performance.

.....  
.....  
.....

**SECTION G – REFERENCES**

(Regarding work history and / or education)

Please provide names and addresses of three referees, one of which should be your most current employer.

- 1. **Name:** ..... **Title:** .....  
**Organisation:** .....  
**Telephone No:** ..... **Email Address:** .....
- 2. **Name:** ..... **Title:** .....  
**Organisation:** .....  
**Telephone No:** ..... **Email Address:** .....
- 3. **Name:** ..... **Title:** .....  
**Organisation:** .....  
**Telephone No:** ..... **Email Address:** .....

**SECTION H – CRIMINAL RECORD CHECK**

Have you ever been convicted of a criminal offence? .....

If so, which one(s)? .....

\*To be convicted a Court would have made a finding that you were either:

- Convicted by a single judge or jury of the offence
- Guilty of the offence(s) charged but dismissed without a conviction

The conviction will be *spent* in certain circumstances which means that you do not have to mention it.

- If you have been given a 556A, your conviction will usually be spent as soon as the order is made or once any bond recognisance or period of probation expires;
- In other cases, if 10 years have passed since the date of your conviction (5 years if you have been a child offender); or
- If you were not sentenced to imprisonment at all or were not sentenced to imprisonment for more than 30 months; or
- You have not re-offended during the 10 year period (or in the case of a child offence 5 yr); or
- No statutory or regulatory exclusion applies to you employment.

**SECTION I – WORKING WITH CHILDREN CHECK**

**If you are starting a new paid job in child-related work after 15 June 2013**, you must apply for a Working With Children Check before you start work.

**How to apply**

**STEP 1:** Complete an online application form. Use this address to complete the application form - <http://www.kids.nsw.gov.au/Working-with-children/New-Working-With-Children-Check/apply/-apply> If required, call a Customer Support Officer on (02) 9286 7219 for assistance.

Once you have submitted the above form, you will receive an application number.

**STEP 2:** Take your application number and proof of identity to a NSW Motor Registry or Council Agency and pay the \$80 application fee (for paid workers).

**Starting work**

Once your identity has been verified, you may use your application number for the verification process. Once your application has been processed and you receive your Working With Children Check number, you should use your Check number for the verification process.

**Your information**

During verification, your employer can only see your Check status. No information regarding your criminal or work history will be shared.

To view your Check status go to <http://www.kids.nsw.gov.au/Working-with-children/New-Working-With-Children-Check/apply/-apply> and click on the “verify” button then enter your name, date of birth, Working With Children Check number (or application number) and email address. You will receive your status via email (or post).

**You MUST supply your Working with Children Check status form to Aquatic Leisure Management/Ezyswim prior to commencing employment.**

**Please sign below to confirm that you have read and understood your obligation to receive your own Working With Children Check prior to commencing employment with Aquatic Leisure Management/Ezyswim.**

**Sign Here:** \_\_\_\_\_ **Print Name:** \_\_\_\_\_

**Date of Birth:** \_\_\_\_\_