

TOWN & COUNTRY LIMITED

2 Mill Street
PO Box 100
MOSSMAN Qld 4873

ACN 070 715 070

Phone: 07 40982355
Fax: 07 4098 2233

APPLICATION FOR EMPLOYMENT CONFIDENTIAL

POSITION APPLIED FOR: _____

SURNAME: _____ GIVEN NAMES: _____

ADDRESS: _____ PHONE NO.: _____

_____ (IF UNDER 2 YEARS OCCUPATION PREVIOUS ADDRESS)

DATE OF BIRTH (Optional) MEMBER OF UNION (Optional) NAME OF UNION

	YES/NO	
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EDUCATIONAL STANDARDS, QUALIFICATIONS, SKILLS OR WORK EXPERIENCE:

EMPLOYMENT HISTORY: (PLEASE LIST PREVIOUS EMPLOYMENT - THIS INFORMATION WILL BE CHECKED)

NAME & ADDRESS	From	To	Position	Reason for Leaving
a)				
CONTACT				
b)				
CONTACT				
c)				
CONTACT				

(PLEASE CIRCLE YES OR NO)

HAVE YOU PREVIOUSLY WORKED WITH TOWN & COUNTRY LTD?: YES/NO

DO YOU SUFFER ANY ILLNESS OR DISABILITY THAT YOU FEEL MAY AFFECT YOUR ABILITY TO DO WORK REQUIRED OF YOU?: YES/NO

IF YES, STATE BRIEF DETAILS _____

HAVE YOU EVER BEEN CONVICTED OF ANY OFFENCE, INCLUDING TRAFFIC OFFENCES WITHIN THE LAST TEN YEARS? YES/NO

IF YES, STATE PARTICULARS: _____

NAME & ADDRESS OF PERSON TO CONTACT IN CASE OF EMERGENCY:

A) _____ PHONE NO.: _____
_____ RELATIONSHIP: _____

B) _____ PHONE NO.: _____
_____ RELATIONSHIP: _____

(ADDITIONAL TO THE RELEVANT AWARD OR AGREEMENT)

1. THAT I AUTHORISE THE COMPANY TO INVESTIGATE THE FOREGOING INFORMATION WITHOUT LIABILITY ARISING THEREFROM.
2. THAT THE INFORMATION HEREIN IS TRUE AND I UNDERSTAND THAT IF FALSE INFORMATION IS SUPPLIED OR RELEVANT DETAILS ARE OMITTED I WILL BE SUBJECT TO INSTANT DISMISSAL WITHOUT NOTICE.
3. THAT I WILL COMPLY WITH ALL THE COMPANY REQUIREMENTS AND DIRECTIONS WHICH APPLY TO ME FROM TIME TO TIME.
4. THAT I WILL WORK ON ANY SHIFT OR AT ANY LOCATION NOMINATED BY THE COMPANY.
5. THAT I WILL COMPLY WITH ANY REQUEST BY THE COMPANY TO SEARCH MY VEHICLE, BAGS OR MYSELF BEFORE I LEAVE THE COMPANY PREMISES.
6. THAT I AM LEGALLY ENTITLED TO WORK IN AUSTRALIA

SIGNATURE OF APPLICANT: _____ DATE: _____

INTERVIEWING REMARKS: _____

INTERVIEWED BY: _____ DATE: _____

EMPLOYMENT HISTORY VERIFICATION:

PERSON CONTACTED	DATE	PHONE NO.	COMMENTS/REASON FOR LEAVING