

# APPLICATION FOR EMPLOYMENT

Personnel Action Pty Ltd trading as Employ  
ACN 050 096 485

## PERSONAL DATA

Name: \_\_\_\_\_ Address: \_\_\_\_\_

Tel: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
(home) (business) (mobile)

Email: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Nationality: \_\_\_\_\_ Residency Status: (if not Australian) \_\_\_\_\_

Do you hold a current driver's Licence? (please tick)  Yes  No

Do you have a car you would be prepared to use as transport to and from work? (please tick)  Yes  No

## TYPE OF EMPLOYMENT

### 1 PERMANENT

Current salary: \$ \_\_\_\_\_ Salary expectations: \$ \_\_\_\_\_

Would you consider temporary work? (please tick)  Yes  No Notice Period: \_\_\_\_\_

### 2 TEMPORARY

Date available: \_\_\_\_\_ Expected hourly rate: \$ \_\_\_\_\_ Length of availability: \_\_\_\_\_

## POSITION REQUIREMENTS

Type of position required: \_\_\_\_\_

Preferred location: \_\_\_\_\_

Preferred industries/types of company: \_\_\_\_\_

## INTERVIEWS

Times available for interviews: \_\_\_\_\_

May we contact your present employer for reference checks? (please tick)  Yes  No

Do you have any health problems or impediments which may determine  
the suitability of a position? (please tick)  Yes  No

If so, what special requirements would be necessary: \_\_\_\_\_

Are you currently or have you previously sought Workers' Compensation  
or work related Insurance Benefits? (please tick)  Yes  No

Name

Salary

Position

Resides

Date

# EDUCATION/QUALIFICATIONS

Secondary • Name of school attended: \_\_\_\_\_

Date of final year:

Level Reached: (please tick)  HSC  School Certificate  Other

(please specify)

Tertiary • Name of UNIVERSITY attended: \_\_\_\_\_

Qualification/s achieved: \_\_\_\_\_

Majors/Discipline: \_\_\_\_\_

Date of final year:

Tertiary • Name of TAFE/COLLEGE attended: \_\_\_\_\_

Qualification/s achieved: \_\_\_\_\_

Date of final year:

Interests and Hobbies: \_\_\_\_\_

Languages spoken: \_\_\_\_\_

Languages written: \_\_\_\_\_

Professional & Social memberships: \_\_\_\_\_

## SKILLS

### GENERAL OFFICE

(Please tick if applicable)

TYPING:

words per minute   
(please specify)

DICTAPHONE:

STANDARD  
 Beginner  Intermediate  Advanced

SHORTHAND:

words per minute   
(please specify)

SWITCHBOARD:

(please specify systems used)

DATA ENTRY:

key strokes per hour

WORD PROCESSING:

STANDARD  
 Beginner  Intermediate  Advanced

SPREAD SHEETS:

STANDARD  
 Beginner  Intermediate  Advanced

DESKTOP PUBLISHING:

STANDARD  
 Beginner  Intermediate  Advanced

SOFTWARE PACKAGES:

(please list types used)

_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

# ACCOUNTING SKILLS

(Please tick if applicable)

<input type="checkbox"/> BASIC BOOK KEEPING	Years experience <input type="text"/>	Systems used: _____
<input type="checkbox"/> ACC. RECEIVABLE	Years experience <input type="text"/>	Systems used: _____
<input type="checkbox"/> ACC. PAYABLE	Years experience <input type="text"/>	Systems used: _____
<input type="checkbox"/> PAYROLL	Years experience <input type="text"/>	Systems used: _____
<input type="checkbox"/> ACC. RECONCIL.	Years experience <input type="text"/>	Systems used: _____
<input type="checkbox"/> STOCK CONTROL	Years experience <input type="text"/>	Systems used: _____
<input type="checkbox"/> BKS TO TRIAL BAL.	Years experience <input type="text"/>	Systems used: _____
<input type="checkbox"/> PROFIT & LOSS	Years experience <input type="text"/>	Systems used: _____
<input type="checkbox"/> BKS TO BAL. SHEET	Years experience <input type="text"/>	Systems used: _____

# EMPLOYMENT DATA

CURRENT/MOST RECENT EMPLOYER	PREVIOUS EMPLOYER	PREVIOUS EMPLOYER
Company Name: _____	Company Name: _____	Company Name: _____
Type of Industry: _____	Type of Industry: _____	Type of Industry: _____
Period of Employment: / / to / /	Period of Employment: / / to / /	Period of Employment: / / to / /
Salary per annum: _____	Salary per annum: _____	Salary per annum: _____
Position/Title: _____	Position/Title: _____	Position/Title: _____
Supervisor's Name: _____	Supervisor's Name: _____	Supervisor's Name: _____
Supervisor's Phone No: _____	Supervisor's Phone No: _____	Supervisor's Phone No: _____
Email: _____	Email: _____	Email: _____
Responsibilities: _____ _____ _____ _____ _____	Responsibilities: _____ _____ _____ _____ _____	Responsibilities: _____ _____ _____ _____ _____
Reasons for leaving: _____ _____ _____	Reasons for leaving: _____ _____ _____	Reasons for leaving: _____ _____ _____

I hereby confirm the information supplied here to be true and correct to the best of my knowledge.

Name: \_\_\_\_\_ Signature: \_\_\_\_\_

**OFFICE USE ONLY (applicant do not fill in)**

Interviewer/Consultant: \_\_\_\_\_ Date and Time of Interview: \_\_\_\_\_

Client and position applied for: \_\_\_\_\_

Suitability for position: \_\_\_\_\_

Candidate's appearance/dress: \_\_\_\_\_

Candidate's communication skills: \_\_\_\_\_

Candidate's personality: \_\_\_\_\_

Candidate's Rating Scale(1=low, 10=high):: \_\_\_\_\_

Position categories candidate to be listed under for database (refer list – Position Codes): \_\_\_\_\_

Positions and types of companies/clients candidate would be most suited: \_\_\_\_\_

Industries candidate has experience in: \_\_\_\_\_

How candidate heard of EMPLOY: \_\_\_\_\_

**TEST RESULTS FROM SKILLCHECK**

TYPING & DATA ENTRY:

<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	<input type="checkbox"/>
WPM	Acc.	D/E Number	Acc.	D/E Alpha	Acc.

RECEPTION SKILLS:

<input type="text"/>	<input type="text"/>	<input type="text"/>
Beginner	Intermediate	Advanced

SHORTHAND:

<input type="text"/>	types of switchboards used
WPM	

SOFTWARE RESULTS:

<input type="text"/> %	<input type="text"/> %	<input type="text"/> %	<input type="text"/> %
Beginner	Intermediate	Advanced	Overall

WORD:

<input type="text"/> %	<input type="text"/> %	<input type="text"/> %	<input type="text"/> %
Beginner	Intermediate	Advanced	Overall

EXCEL:

<input type="text"/> %	<input type="text"/> %	<input type="text"/> %	<input type="text"/> %
Beginner	Intermediate	Advanced	Overall

POWERPOINT:

<input type="text"/> %	<input type="text"/> %	<input type="text"/> %	<input type="text"/> %
Beginner	Intermediate	Advanced	Overall

OTHER PACKAGES TESTED:

**REFERENCES CHECKED/TO BE CHECKED**

Name: \_\_\_\_\_  
Company: \_\_\_\_\_  
Position: \_\_\_\_\_  
Contact No: \_\_\_\_\_  
Reference Results:  Excellent  Good  Poor

Name: \_\_\_\_\_  
Company: \_\_\_\_\_  
Position: \_\_\_\_\_  
Contact No: \_\_\_\_\_  
Reference Results:  Excellent  Good  Poor

Name: \_\_\_\_\_  
Company: \_\_\_\_\_  
Position: \_\_\_\_\_  
Contact No: \_\_\_\_\_  
Reference Results:  Excellent  Good  Poor