

# 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:<br>/ / to / /   | Period of Employment:<br>/ / to / /   | Period of Employment:<br>/ / 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:<br>_____<br>_____<br>_____<br>_____<br>_____<br>_____<br>_____<br>_____<br>_____<br>_____ | Responsibilities:<br>_____<br>_____<br>_____<br>_____<br>_____<br>_____<br>_____<br>_____<br>_____<br>_____ | Responsibilities:<br>_____<br>_____<br>_____<br>_____<br>_____<br>_____<br>_____<br>_____<br>_____<br>_____ |
| Reasons for leaving:<br>_____<br>_____<br>_____<br>_____  | Reasons for leaving:<br>_____<br>_____<br>_____<br>_____  | Reasons for leaving:<br>_____<br>_____<br>_____<br>_____  |

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:          
WPM Acc. D/E Number Acc. D/E Alpha Acc.

RECEPTION SKILLS:     
Beginner Intermediate Advanced

SHORTHAND:   
WPM types of switchboards used

SOFTWARE RESULTS: % % % %  
Beginner Intermediate Advanced Overall

WORD: % % % %  
Beginner Intermediate Advanced Overall

EXCEL: % % % %  
Beginner Intermediate Advanced Overall

POWERPOINT: % % % %  
Beginner Intermediate Advanced Overall

OTHER PACKAGES TESTED: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**REFERENCES CHECKED/TO BE CHECKED**

|  |  |  |
|--|--|--|
| Name: _____  | Name: _____  | Name: _____  |
| Company: _____   | Company: _____   | Company: _____   |
| Position: _____  | Position: _____  | Position: _____  |
| Contact No: _____  | Contact No: _____  | Contact No: _____  |
| Reference Results: <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/><br>Excellent Good Poor | Reference Results: <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/><br>Excellent Good Poor | Reference Results: <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/><br>Excellent Good Poor |