

APPLICATION FORM				
Position Applied For (if known):	Date of Application://			
Type of Position: Full Time Part Time Casual	Available to Commence://			
Are you an Australian Citizen? Yes No	Specify Visa Type:			
If not, do you have a permit to work? Yes No	Expiry Date:/			
PERSONA	L DETAILS			
Surname:	First Name/s:			
Address:	Address:			
Email:	Mobile Phone:			
QUALIFICATIONS & TRAINING				
Please list your qualifications:				



	RELEV	VANT SKILLS & EXP	ERIENCE
	Please provide	answers to the fol	lowing questions:
	n working for Willmot Smash Specialist? What makes you		What are the attributes and skills that you would bring ner applicants?
		AVAILABILITY	
Please tick (✓) which days/times you are <u>available to work</u> :			
Day of the week	7:30am – 4:30pm		
Monday			
Tuesday			
Wednesday			
Thursday			
Friday			
Day of the week	8:00am – 11:00am		
Saturday			
Do you have any holiday	s hooked/time required off	over the next 12 m	onths? If yes, please describe in detail:
Dates of holiday/time		OVER THE HEAT 12 III	onais: ii yes, piedse describe iii detaii.
off required:			
on required.			



WORKCOVER

Employees who knowingly supply false or misleading information, will not be entitled to compensation or damages under the Workers' Compensation and Rehabilitation Act 2003 (the Act), for any event that aggravates the non-disclosed pre-existing injury or condition. Please note you may be requested to apply to the Workers' Compensation Regulator for a copy of your worker's claims history summary.

Do you have any past or current medical condition which may affect your performance in the role applied for, or which may be aggravated or worsened by the duties of the role? \square Yes \square No	
Considering the tasks of this role, will you require any adjustments to be made to perform the duties of the role?	

Roles at Willmot Smash Repair Specialist may involve the following physical requirements:

- Long periods of standing
- Long periods of sitting (administration)
- Repetitive movements (i.e.: use of tools, administration typing)
- Heavy lifting
- Bending/twisting/squatting

Please complete the following:			
Do you have difficulties with the following:	No	Yes	Provide details where required
Back problems			
Neck problems			
Shoulder pain or discomfort			
Sporting injuries			
Prolonged standing			
Allergies			
Conditions of the bones (including fractures/broken bones and dislocations			
Skin conditions			
Sitting for prolonged periods			
Can you walk on rough or uneven ground?			
Can you kneel or crouch?			
Is there any reason why you cannot wear PPE?			
Any other medical conditional that may impact your ability to work or aggregate a pre-existing medical condition			

You agree that, at the time of completing this application form, you have disclosed all relevant issues including but not limited to any pre-existing injury, illness or use of prescription medication of which you are aware, which may adversely affect your ability to carry out your functions and duties for Willmot Smash Repair Specialist.



REFERENCES			
Please give the	names of two referees		
Most Recent Employer/Company:	Previous Employer/Company:		
Name:	Name:		
Position/Relationship:	Position/Relationship:		
Daytime Phone Number:	Daytime Phone Number:		
CONDITION	S OF EMPLOYMENT		
The information requested on this application for employment is necessary to ensure a fair and thorough evaluation of all applicants with Willmot Smash Repair Specialist. Personal information contained within this form shall be available only to employees and managers of the company with direct involvement in the recruitment process. You may update or access your application information at any time by contacting the administration office. Your application form will be kept in a secure place and after 3 months will be destroyed. In order to ensure the suitability of the person for our requirements and to ensure that employee is satisfied in the position, it is the policy of Willmot Smash Repair Specialist to put each new employee on a probationary period.			
I hereby affirm that all information given by me in this application for employment is true and correct and that I have not knowingly withheld any circumstances or facts that would, if disclosed, affect my application. I understand that if considered for employment, the information provided in this application and my employment and personal history may be subject to investigation by Willmot Smash Repair Specialist and I hereby authorise such an investigation to be made. If employed, I understand that I shall be subject to the company's regulations. I further affirm my understanding that in the event I am employed by the company my employment or any assignment during said employment shall be for the convenience of the company, shall be governed by applicable Australian law and Company policy.			
Applicant's Signature Date			