

# application for employment

Please ensure you complete all areas of this form clearly in blue or black pen

First Name: \_\_\_\_\_

Last Name \_\_\_\_\_

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

City: \_\_\_\_\_

Postcode: \_\_\_\_\_

Home Phone: \_\_\_\_\_

Mobile Phone: \_\_\_\_\_

Date of Birth (Optional): \_\_\_\_\_

**Are you an Australian resident?**

Yes

No

**If no please list visa details:**

Type: \_\_\_\_\_

Number: \_\_\_\_\_

Expiry Date: \_\_\_\_\_

**Position applying for:**

Food and Beverage

TAB

Kitchen

Front Office

Gaming

Bottleshop

Chef

Housekeeping

**What type of employment are you seeking?**

Full Time

Part Time

Casual

**Are you willing and able to work a variety of shifts over a 24 hour roster, 7 days a week, including weekends and public holidays?**

Yes

No

**Please indicate your availability for work:**

MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	SUNDAY

**What is your preferred work location?**

Ballarat

Berwick

Boronia

Caulfield

MPD Caulfield

MPD Berwick

Zagame's House

**How many hours a week are you looking to work:**

Less than 10

10 - 20

20 - 30

30+

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What is your current health at present?

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Have you any known physical, medical or other conditions which may affect your ability to carry out the inherent requirements of the position applied for?

Yes  No

If yes please detail:

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Have you ever been, in Victoria or elsewhere, convicted of an offence or found guilty of a criminal offence?

Yes  No

Is there any charge pending against you in respect to any offence? (Excluding minor traffic offences)

Yes  No

Please outline why you think you would be a suitable employee for Zagames:

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## Education Details:

Please list most recent education first:

Secondary School / University / Professional Institution	Year From	Year To	Highest Standard Passes or Certificate / Diploma / Degree Obtained

Are you currently studying?  Yes  No

If so what course and when are you expected to complete this course?

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## Training Details:

Please list any additional training or courses you have undertaken (e.g. RSA)

Course:	Year:	School / Institution / Tafe

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## Employment History:

Please list most recent position first:

### Company 1 Details:

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

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

Positions held:

Position:	From	To:

Reason for Leaving:

\_\_\_\_\_  
\_\_\_\_\_

### Company 2 Details:

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

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

Positions held:

Position:	From	To:

Reason for Leaving:

\_\_\_\_\_  
\_\_\_\_\_

### Company 3 Details:

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

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

Positions held:

Position:	From	To:

Reason for Leaving:

\_\_\_\_\_  
\_\_\_\_\_

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## Business / Personal References:

Name:	Position Held:	Contact Number:

I declare that the information I have given is true and complete and that I have not withheld any information which may adversely affect my suitability for employment.

I understand and agree that any offer of employment is based to me or gazetted to me by the company.

I understand and agree that any offers of employment is based upon accuracy of information contained herein, and that any misinterpretation of facts or material omission could be cause for instant dismissal.

I understand that I will be expected to be available to work over a 24 hour day, 7 day a week roster including public holidays.

We advise that a failure to disclose or the making of a false or misleading disclosure, would disentitle you to compensation pursuant to the Accident Compensation Act 1985 should you suffer any reoccurrence, aggravation, acceleration, exacerbation or deterioration of your pre-existing injury or disease arising out of or in the course of, or due to the nature of employment with the Zagame Corporation will rely upon failure to disclose in accordance with the provisions of the Accident Compensations Act 1985 as grounds for denying compensation in accordance with Sections 82(7) and (8).

Signed: \_\_\_\_\_

Date: \_\_\_\_\_