

APPLICATION FOR EMPLOYMENT

Important Note: Any false or misleading statements made on this application could result in an offer of employment being withdrawn or dismissal after employment. By filling out this application you authorise Benelec or its representative to verify the information submitted with the relevant entities.

Please write clearly into the fields. Use N/A for Not Applicable or Not Available.

POSITION DETAILS				
Position		Anticpated Annual Wag	е	
IDENTIFICATION				
First Name		Type of ID		
Family Name		ID Number	Date of	Birth
CONTACT DETAILS				
Tel.No.BH		Preferred Method of Communication		
Tel.No.AH		Street Address		
Mobile Number		Suburb		
Email Address		State	Post Code	
PERMITTED RESIDENCY IN A	USTRALIA			
Туре		Australian Citizenship: ((Y/N)	
Date of Arrival		Date Granted		
Expiry				
Do You Smoke? (Y/N) Is there a reason you may not p Do you have a pre-existing injury, r It is essential that you reply frank	pre-determined lunch ass a Government Security C nedical condition or disability that	neck? It could impact on your ability to		
QUALIFICATIONS				
Туре	Institution	Country	Yea	r Acquired
LICENSES / TICKETS				
Туре		Issuing Authority	Year Acquired	Expiry



				(Scale 0-1	0: 0 = Not at all,	10 = Excel
ANGUAGES						
	Dialect			Speak	Read	Write
ENERAL						
hat attracted you to apply for	this position?					
w did you find this job openi	ng?					
w does your work experienc	e make you a good fit fo	or this role?				
w would this job help you ad	vance your professiona	al development	goals?			
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ffered this position, when ca	n you start?					
offered this position, when ca u need to fill out the above ou have submitted a CV in	n you start?			fill out the following se	ection.	
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Date

Applicant's Signature (or Initials)