



# APPLICATION FOR EMPLOYMENT

## ABOUT YOU

FIRST NAME: ..... SURNAME: ..... PREFERRED NAME: .....

STREET ADDRESS: ..... SUBURB: .....

STATE: ..... POST CODE: .....

MOBILE NUMBER: ..... EMAIL: .....

DATE OF BIRTH: ..... / ..... / .....

GENDER IDENTITY: MALE  FEMALE  OTHER  .....

ARE YOU A PERMANENT RESIDENT OF AUSTRALIA: YES  NO

IF NOT, PLEASE SPECIFY VISA TYPE AND EXPIRY DATE .....

## WORKING AT STEELERS

Employment status seeking: FULLTIME  PART TIME  CASUAL

What role are you seeking?

BAR & GAMING  RECEPTION  CELLAR  MANAGEMENT

Please state the start and finish times for each day that you're available to work. (earliest start 9am - Latest finish 6am)

|        | MON | TUES | WED | THURS | FRI | SAT | SUN |
|--------|-----|------|-----|-------|-----|-----|-----|
| Start  |     |      |     |       |     |     |     |
| Finish |     |      |     |       |     |     |     |

Any days or times you can't work?

|       | MON | TUES | WED | THURS | FRI | SAT | SUN |
|-------|-----|------|-----|-------|-----|-----|-----|
| Times |     |      |     |       |     |     |     |

\*Should you be successful & your availability changes after employment, your employment may not be continued. We will take into consideration study schedules.

DO YOU HOLD A CURRENT AND APPROVED RSA? YES  NO

DO YOU HOLD A CURRENT AND APPROVED RCG? YES  NO

WHEN COULD YOU COMMENCE EMPLOYMENT? IMMEDIATELY  1 WEEK  2 WEEKS  4 WEEKS

## EMPLOYMENT RECORD

| EMPLOYER NAME | POSITION | EMPLOYED |    | REASON FOR LEAVING |
|---------------|----------|----------|----|--------------------|
|               |          | FROM     | TO |                    |
|               |          |          |    |                    |
|               |          |          |    |                    |

**HISTORY**

DO YOU HAVE ANY ADULT COMMONWEALTH OR TERRITORY CONVICTION WHICH ARE LESS THAN 10 YEARS OLD?

YES  NO

DO YOU HAVE ANY JUVENILE COMMONWEALTH OR TERRITORY CONVICTIONS WHICH ARE LESS THAN 5 YEARS OLD?

YES  NO

DO YOU HAVE ANY CONVICTIONS FOR COMMONWEALTH OR TERRITORY OFFENCES WHICH ARE OVER 10 YEARS OLD (5 YEARS FOR JUVENILE)?

YES  NO

IF YES TO ANY OF THE ABOVE, PROVIDE DETAILS BELOW:

.....  
.....

TO ASSIST THE CLUB TO FULFIL ITS OBLIGATIONS UNDER WORKPLACE HEALTH & SAFETY LAWS, PLEASE ANSWER THE FOLLOWING QUESTIONS.

DO YOU HAVE A DISABILITY OR MEDICAL CONDITION THAT MAY:

i) Prevent you from performing the inherent requirements of the position that you're applying for?

YES  NO

ii) Pose a risk to your health & safety, or the health & safety of your fellow employees in the workplace?

YES  NO

IF YES TO ANY OF THE ABOVE, PROVIDE DETAILS BELOW:

.....  
.....

Signature: ..... Date: ...../...../.....

*Thankyou for your application!*  
*Only shortlisted applicants will be contacted.*