

EMPLOYMENT RECORD (LAST 3 EMPLOYERS OR LAST 10 YEARS, LAST EMPLOYER FIRST)

EMPLOYER NAME AND ADDRESS	POSITION	EMPLOYED		REASON FOR LEAVING	REFERENCE NAME, ADDRESS & TELEPHONE NO.
		FROM	TO		

SKILLS (CLERICAL, CHEF, WAITER, STEWARD, HEAD STEWARD ETC)

SKILL	EXPERIENCE	REMARKS

HOBBIES OR INTERESTS

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MEDICAL

WOULD YOU BE PREPARED TO UNDERGO A MEDICAL EXAMINATION BY THE CLUB'S DOCTOR TO DETERMINE YOUR ABILITY TO CARRY OUT THE FULL DUTIES OF THE POSITION YOU HAVE APPLIED FOR?	YES <input type="checkbox"/> NO <input type="checkbox"/>
ARE YOU AWARE OF ANY CONDITION LIKELY TO EFFECT THE FULL PERFORMANCE OF YOUR DUTIES IN EMPLOYMENT?	YES <input type="checkbox"/> NO <input type="checkbox"/>
IF YES, PLEASE GIVE FULL DETAILS (INCLUDING FACILITIES OR SERVICES WHICH COULD BE REASONABLY PROVIDED TO ENABLE YOU TO DO THE JOB).	
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GENERAL

	YES	NO	IF YES, GIVE DETAILS
1. Have you ever been discharged from employment because your work or conduct was not satisfactory?			
2. Have you in the last five years been convicted of any offence other than minor traffic infringements?			
3. Do you have any objection to enquiries of your present employer regarding qualifications and character?			
4. Do you have any objection to us seeking verification and additional information to any matter within this application?			
5. Is there any additional information you wish to give?			

PROBATION

I understand and accept that as a condition precedent to my obtaining the position applied for, I shall have to undergo a probationary period of employment.

DECLARATION

I authorise the Club to obtain information from any person concerning my suitability for employment with the Club and I hereby release any such person from liability for any damage, claims, costs, expenses which may arise from the provision of such information. I further declare that the statements made by me in this application are true, complete and correct. I understand that a false or misleading answer to any question in this application will be regarded as misconduct and will be grounds for my dismissal from employment.

DATE: _____ SIGNATURE: _____

FOR OFFICE USE ONLY Code: 1 Outstanding. 2 Excellent. 3 Good. 4 Satisfactory. 5 Fair. 6 Poor.

Interview Assessment	Code	Remarks	Code	
General Appearance				
Dress and Grooming				
Personality				
Language Command (a) Self Expression				
(b) Comprehension				
Technical Background for position				
Attitude				
General Comments or Summary				
FIRST INTERVIEW DECISION		SECOND INTERVIEW DECISION		
Further Interview _____ Unsuitable _____		Job Offer _____ Unsuitable _____		
Date _____ By _____		Unsuitable this area _____		
		Date _____ By _____		

Reference Check: _____

Document/s Sighted: Birth Certificate Passport Other

Medical _____

JOB OFFER:

Job Title: _____ Salary: _____ To Start On: _____

Job Status: F/T: _____ P/T: _____ Casual: _____

Date: _____ Signed: _____

ID Number: _____ Locker No.: _____