

# Employment Application Form

Only people with the right to work in Australia may apply.

For Office Use Only
Employee ID:

THIS DOCUMENT WILL REMAIN CONFIDENTIAL WHEN COMPLETED				
<b>Section 1 – Your Details</b>				
Surname		First Name		
Address			State	Postcode
Home Telephone			Mobile	
In Case of Emergency Contact Person			Mobile	
Email				
<b>Section 2 – Right to Work Details</b>				
Do you identify as Aboriginal or Torres Strait Islander			Yes	No
Are you an Australian Citizen or Permanent Resident?			Yes	No
Do you have a current Visa permitting you to work in Australia?			Yes	No
<p>Please note that prior to any offer of employment being made, you will need to provide verification of your right to work in Australia, which must include one of more of the following documents:</p> <p>Australian or New Zealand passport, or            Australian birth certificate and photograph, or            Australian citizenship certificate, or            Evidence of permanent resident status*, or            Temporary visa</p>				
<b>Section 3 – Availability</b>				
What type of employment are you interested in?	Part-time	Full-Time	Casual	
Are you prepared to do Shift Work? (If applicable)	Yes	No		
Days/Hours available?	Monday	Morning	Afternoon	Night
Note - you will <u>not</u> necessarily be asked to work all the hours you are available. The information enables us to match our employment opportunities to your availability	Tuesday	Morning	Afternoon	Night
	Wednesday	Morning	Afternoon	Night
	Thursday	Morning	Afternoon	Night
	Friday	Morning	Afternoon	Night
	Saturday	Morning	Afternoon	Night
	Sunday	Morning	Afternoon	Night

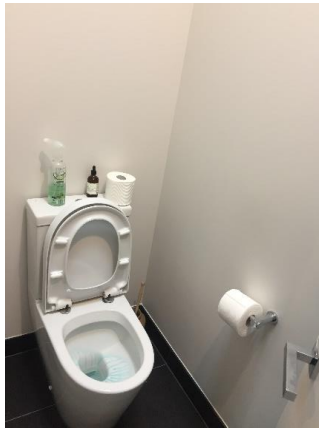
Section 4 - Employment History			
<b>Current or most recent Employer:</b>			
Position		Type of Business	
Supervisor		Location	
Date Started		Date Finished	
Responsibilities/Duties:			
Reason for Leaving:			
<b>Company 2:</b>			
Position		Type of Business	
Supervisor		Location	
Date Started		Date Finished	
Responsibilities/Duties:			
Reason for Leaving:			
Have you worked for Mayday Cleaning Co previously?                      Yes                      No			
Section 5 – Professional Referees (Will only be contacted if a job offer is made)			
<u>Referee 1:</u> Name of Referee: Company: Position Phone (   ) Email		<u>Referee 2:</u> Name of Referee: Company: Position Phone (   ) Email	



<b>Section 6 – Certifications, Checks &amp; Qualifications</b>				
<i>(Where you answer 'Yes', Items marked with [*] will need to be sighted prior to any offer of employment)</i>				
Licences or Certificates	Yes / No	Class	Other details	Expiry Date
Driver's Licence	Yes No			
First Aid Certificate	Yes No			
Certificate II or III in Asset Maintenance or Cleaning Operations*	Yes No			
Working With Children Check* (Current)	Yes No			
Police Check* (within last 3 months)	Yes No			
As you are applying for a position of trust, do you have any criminal convictions that may make it inappropriate for you to take this position?	Yes No			
Highest Level of education completed	Secondary (high school)      Tertiary Other			
Are you currently studying?	Yes      No	If yes, what are you studying? Institution: Date started:                      Expected completion Date:		
Are you currently receiving Centrelink benefits?	Yes      No			
Do you have your own transport?	Yes      No			
Do you have construction white card?	Yes      No			
<b>Section 7 – Skills</b>				
DO you have previous cleaning experience?	None                      My own home                      My friends' home I have worked as a cleaner before			
List relevant skills – e.g. domestic, retail, commercial cleaning, computer, customer service, hospitality etc.				
<b>Language Level</b>				
Is English your first language?	Yes	No		
What is your level of spoken English?	Basic	Intermediate	Fluent	
What is your level of written English?	Basic	Intermediate	Fluent	
<b>Section 8 – Disclosure of Relationships</b>				
Are you in any way formally (through family or marriage) related to any person currently employed by Mayday Cleaning Co?	Yes	No		
If Yes, please provide details:				

## Section 9 – Cleaning Experience

This bathroom has not been cleaned for two weeks. Please describe in bullet points how you would clean this bathroom and the products you would use.



## Disclosure of Relevant Medical History

The cleaning work Mayday Cleaning Co employees perform requires a range of physical movement including bending, stretching, repetitive action, pushing, pulling, light to moderate lifting and standing and walking for most of a shift. While these activities if undertaken correctly and with care should present no risk to a person in good health, they may present an aggravation risk to a person with an existing or previous injury or condition.

At Mayday Cleaning Co we take our duty of care for our employees seriously and will not knowingly place any person at risk. For this reason, applicants are required to identify if they have had or currently suffer from an injury or condition relating specifically to the work they will undertake if employed.

If you answer **Yes** to any of the questions below it does not necessarily mean that you will not be employed by Mayday Cleaning Co, however we may need to seek additional information from you in order to ensure an informed decision can be made.

**Please circle the correct response below:**

**Do you have or have you previously suffered from:**

A spinal, neck or back related injury or condition requiring treatment?	Yes	No
A hip, knee, wrist or elbow injury or condition requiring treatment?	Yes	No
Any other injury or condition resulting from lifting, bending, repetitive action, pushing, pulling, standing or walking.	Yes	No
Any diagnosed degenerative or chronic condition which is likely to be Aggravated by repetitive lifting, bending, pushing, pulling, standing or walking Do you have asthma?	Yes	No
Are you allergic to any chemical (eg bleach)?	Yes	No
Are you allergic to any pet or pet hair (eg cat hair)?	Yes	No
Are you allergic to dust?	Yes	No
Do you wear prescription spectacles (glasses)?	Yes	No
Are you comfortable using a step ladder?	Yes	No
Have you had or do you have any other illnesses, injuries, disability (eg epilepsy) which may affect your ability to perform the job you have applied for or attendance at work?	Yes	No
If yes, please describe.		
Are you a smoker?	Yes	No

### Additional 'Right to Work Information' (Visa Holders Only)

Mayday Cleaning Co has a responsibility to ensure that any person offered employment, has the right to work in Australia. As you have identified that you are not an Australian or New Zealand Citizen or Permanent Resident, we request that you provide the following details in order the Mayday can complete the necessary checks to verify your work rights.

Your full name as it appears on your Visa:

Your Visa Type:

Your Visa Number:

The Expiry Date of your Visa:

Your Passport Number:

The country in which your Passport was issued:

## **PRIVACY STATEMENT**

This employment application form is maintained in strict confidence. Personal information collected via this application will only be used for the purpose of recruitment by Mayday Cleaning Co.

The information you submit to us may be disclosed to referees, our team members who are involved in recruitment or support roles, security organisations, recruitment agencies and other third parties who assist us in the recruitment process.

Any information we collect about you in future will be used and disclosed in the same manner as described above unless we tell you otherwise in advance. You may request access to personal information about you that is held by us.

## **CONSENT**

I consent to Mayday Cleaning Co using and disclosing my personal information in the manner described above.

1. I hereby declare that the information I have provided on this application form is true and correct and I understand that any offer of employment is based upon the accuracy of the information I have provided.
2. I understand any false or misleading information can be sufficient reasons for my immediate dismissal.
3. I understand that part of the application procedure may involve a medical examination specific to the job requirements by a nominated Medical Officer, and I authorise disclosure of the relevant results of this examination to the Company.
4. I consent to any reference checks that may be necessary to support this application.
5. I consent to my Police check to be viewed by the client at the site I will be placed

Further details will be required, such as bank information and a tax file number upon commencement of employment.

Please feel free to attach any documents in support of your application.

**By Checking the box below, you confirm and declare that you have read and agree to all conditions stipulated in this Application and that your responses to all questions asked are true and correct to the best of your knowledge.**