

# APPLICATION FOR EMPLOYMENT



We are an equal opportunity employer, and make every effort to select the best qualified individual for the job based on job related qualifications and experiences, regardless of race, colour, creed, sex, national origin, age, disability, sexual orientation, marital status, personal association, physical features, political or religious beliefs or activities.

Position Applied for 1) \_\_\_\_\_

Position Applied for 2) \_\_\_\_\_

Employment Type:  FULL TIME  PART TIME  CASUAL

Availability to commence: \_\_\_\_\_

How many hours a week are you looking for:

Less than 10  20-30  Other (please specify) \_\_\_\_\_

10-20  30 +

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

Availability for work

AM

PM

Monday

Tuesday

Wednesday

Thursday

Friday

Saturday

Sunday

## PERSONAL INFORMATION

Given name: \_\_\_\_\_ Surname: \_\_\_\_\_

Home phone: \_\_\_\_\_ Mobile: \_\_\_\_\_

Suburb \_\_\_\_\_ Post Code \_\_\_\_\_

e-mail: \_\_\_\_\_ DOB (Optional): \_\_\_\_\_

## EMPLOYMENT STATUS

Are you an Australian resident?  Yes  No

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

If no please list visa details:

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

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

## EDUCATION & TRADE SKILLS

Are you currently studying?  Yes  No Expected competition date: \_\_\_\_\_

Course & Institution: \_\_\_\_\_

List any qualifications you have which are relevant to the position applied for:

Course: \_\_\_\_\_ Institution: \_\_\_\_\_

Course: \_\_\_\_\_ Institution: \_\_\_\_\_

## SAFETY

Do you hold a current: Blue Card (Child Care and Licensed Care Services)  Yes  No

Responsible Service of Alcohol QLD  Yes  No Apply First Aid Certificate  Yes  No

List any other certificates/licences you have (e.g. Forklift): \_\_\_\_\_

## MEDICAL

Do you have any past or current medical conditions which may affect your performance in the role you have applied for:

Yes  No

If yes, please describe in detail: \_\_\_\_\_

I agree to be examined prior to employment and any time during my employment by a medical practitioner

nominated by the comply if required  Yes  No

## GROOMING & PERSONAL PRESENTATION

Do you have any visible tattoos or piercings?  Yes  No

Are you willing to remove visible piercings and cover any tattoos?  Yes  No

Paradise Resort has a strict grooming policy, only applicants willing to comply with this policy will be considered

## EMPLOYMENT HISTORY - (Please Print Clearly)

*If you have a current resume, please attach and ignore the following employment history*

Current/ Previous Position: \_\_\_\_\_

From (Month & Year) \_\_\_\_\_ To (Month & Year) \_\_\_\_\_

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

Duties & Responsibilities: \_\_\_\_\_

Reason for leaving: \_\_\_\_\_

Referee Name: \_\_\_\_\_ Position: \_\_\_\_\_

Phone number: \_\_\_\_\_ May we contact:  Yes  No

Current/ Previous Position: \_\_\_\_\_

From (Month & Year) \_\_\_\_\_ To (Month & Year) \_\_\_\_\_

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

Duties & Responsibilities: \_\_\_\_\_

Reason for leaving: \_\_\_\_\_

Referee Name: \_\_\_\_\_ Position: \_\_\_\_\_

Phone number: \_\_\_\_\_ May we contact:  Yes  No

Please outline why you would be a suitable employee for this property: \_\_\_\_\_

### CONDITIONS OF EMPLOYMENT

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 will abide by company rules and policies, as declared 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.

If required, I agree to be examined prior to employment and at any time during my employment, by any medical practitioners/physiotherapist or occupational therapist nominated by the company. I understand that in some instances a security clearance will need to be made on my past (by Commission for Children and Young People and Child Guardian).

I consent to undergo such a clearance and authorise Paradise Resort Gold Coast to secure any information regarding myself and hereby release any person, firm or institution of all liability for any damage whatsoever issuing from such information. I further understand that a false application renders me liable for dismissal.

Thank you for your application; you will ONLY be contacted should your skill set match a suitable position available. Please note your application will be kept on file for a period of one (1) to three (3) months after which time it will be destroyed.

**Good luck with your application and thank you again for your interest in Paradise Resort Gold Coast.**

Applicant Signature \_\_\_\_\_

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