



JOB APPLICATION

Instructions for Managers	Instructions for Applicant
1. This form is to be given to applicant prior to an interview. 2. Information used for the recruitment process only.	1. Complete as part of your application. 2. Give the form to the Manager or Staff Member.
For your information The information within the Application will be used only for recruitment purposes and will be distributed to the Manager. Applications will be kept confidential.	

Work Request Information				
First Name:		Last Name:		
Preferred position:				
Preferred work option	Full Time <input type="checkbox"/>	Part Time <input type="checkbox"/>	Temporary <input type="checkbox"/>	
Other positions you would consider:				
Availability to work (please tick):				
Every day including shift work <input type="checkbox"/>	Weekends only <input type="checkbox"/>	Week days only <input type="checkbox"/>	Day time only <input type="checkbox"/>	Other <input type="checkbox"/> please specify:
When can you start work?				
Hours you are available:				
Personal Information				
Are you eligible to work in the United States?	Yes <input type="checkbox"/>	No <input type="checkbox"/>		
Do you hold a Work Visa?	Yes <input type="checkbox"/>	No <input type="checkbox"/>		
Type of visa:				
Expiry date:				
Contact Details:				
Address:				
Home number				
Mobile number				
Education				
Institution	Date from	Date to	Course	Level achieved



Employment History *(please list most recent position first):*

Start Date	End Date	Position Held	Organization	Referee name & position	Referee contact number
		Hourly Rate:			
		Hourly Rate:			
		Hourly Rate:			

Skills and Achievements

Please detail other skills which may assist you with your application (i.e. computer skills, awards and achievements)

Capacity to Work Declaration

If necessary for the job, are you older than:	14 <input type="checkbox"/>	19 <input type="checkbox"/>
	15 <input type="checkbox"/>	21 <input type="checkbox"/>
	16 <input type="checkbox"/>	
Can you meet the requirements of start and finish times of shifts?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
I give permission for Corporate Cleaning Services to check my work entitlement with the Department of Immigration and Citizenship.	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Do you have a criminal history? If so, please specify below with dates:	Yes <input type="checkbox"/>	No <input type="checkbox"/>

Other information

Are you happy to undergo a Background check if required?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Do you have a driver's license?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Do you have your own transport/car?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Do you have EWP (Elevated Work Platforms) training?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Do you know how to strip, cut & polish floors?	Yes <input type="checkbox"/>	No <input type="checkbox"/>

Applicant Declaration

I certify that the information supplied in my resume and within this Employment Application is true and correct to the best of my knowledge. I understand that false, misleading or non-disclosure of information may result in future disciplinary action including termination of employment.

Signature		Name	
		Date	