

Residency

Are you an Australian or New Zealand citizen or do you possess an Australian Work Visa?  
(

1. Applicant Details

- Title  
( ) Mr  
( ) Ms  
( ) Mrs  
( ) Dr  
( ) Professor  
( ) Miss  
( ) Other  
( ) Mx  
( ) Do not wish to disclose

First Name .....  
Preferred Name .....  
Last Name .....  
Address Search .....  
Postal Address:  
Address Line 1 .....  
Address Line 2 .....  
Country .....  
Suburb / Town .....  
State .....  
Post Code .....  
My Suburb / Post Code is not listed .....  
Contact Number .....  
Mobile Number .....  
Alternate Number .....  
Email .....

2. Residency & Drivers Licence

Please state below your country of residency.  
.....

Please indicate your residency status  
(

If you have indicated the Visa status, please provide details on your Visa subclass?  
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Do you have a current Drivers Licence?  
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If yes please state the class of Drivers Licence and your Drivers Licence number.

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COVID-19 Vaccination Status

Please advise of your current vaccination status for COVID-19 (please be advised, full vaccination for COVID-19 is a requirement for certain positions within the City of Kwinana).

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If exempt, please provide further details below:

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Health

A previous Worker's Compensation or injury/disability is NOT a barrier to the consideration of an application for employment. However, to assist in assessing opportunities for your placement in appropriate employment please answer the following questions.

To the best of your knowledge and belief are you of sound health?  
(

If no, please provide details

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Have you ever made a Worker's Compensation claim?  
(

If "YES" will the disability or injury be likely to affect your work performance or could it recur or be aggravated by the type of work for which you are applying for?

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Please give details of previous claim.

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3. Convictions

A criminal record does not necessarily disqualify an applicant, If rejection of your application is considered solely because of a criminal record, you will be given the opportunity to discuss the matter fully before a final decision is made.

Do you have any current convictions?  
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If "YES" please give details.

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Declaration of Conflict of Interest

Do you have a significant family member or other relationship with a Contractor, Volunteer, Elected Member or any other staff member currently employed or working at the City of Kwinana?

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If yes, please provide further details below:

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Do you have any actual, potential or perceived conflicts of interest (eg. financial benefits from the City or direct/third party disputes with the City) that could impact on your selection for a position within the City of Kwinana?

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If yes, please provide further details below:

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4. Attachments

Please attach your resume

Please attach your covering letter.

Selection Criteria/Two Page Summary (If Applicable, Refer to Advert)

Referee 1

Full Name

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Contact Number

Referee 2

Full Name

Contact Number

Survey

Can you please indicate by selecting one of the following options where you heard about this position.  
(

If other please specify