

Application for employment

| Date of application: | Position applied for: | | | | |
|---|----------------------------|-------------------------------|---------------------------------|-----------------------|-----------------------------|
| Seek Christian Jobs Ethical jobs Wesley Mission intranet Wesley Mission website InkedIn Other (specify) Staff referral (Please print name of employee who referred you) Your details Title: | Date of application: | Availability to commence: | | | |
| LinkedIn Other (specify) Staff referral (Please print name of employee who referred you) Your details Title: | How did you find out abo | out this position? | | | |
| Staff referral (Please print name of employee who referred you) Your details Title: | ☐ Seek ☐ Christian Jo | bs ☐ Ethical jobs ☐ | ☐ Wesley Mission intranet ☐ | Wesley Mission | n website |
| Title: | ☐ LinkedIn ☐ Other | (specify) | | | |
| Title: Rev. Mr Mrs Miss Other (please specify) Surname: Given name(s): Contact phone: Home Mobile Work Email: Do you speak any languages other than English? No Yes (please specify) Centrelink information (for supported employees only) Type of benefit: Yes - Centrelink referral Centrelink referral? No number: Are you legally entitled to work in Australia? Yes, Lam an Australian/New Zealand citizen or permanent resident (please provide evidence) Yes, I hold a valid work visa (please attach a copy and provide details below) Type of Visa: Expiry date: In the last 10 years, have you spent more than six months in a country while over the age of 16 years? No Yes (please list all relevant countries and contact Wesley Mission to ask if you will require international police checks) Have you previously worked for Wesley No Yes (please provide details below) Mission? Date employed: Position held: Centre/program name: Reason for leaving: Do you have an existing connection to any Wesley Mission staff member or service? (e.g. Foster care) No Yes (please provide details) Please state your highest level of education Year 12 Certificate/ Diploma Bachelor Degree Masters Other Please Specify Please provide relevant registration/ licence details below Driver licence Class: Licence number Registration number Practicing certificate anniversary date Trade qualification: Licence number: Vaccination history: If vaccination history is required for the role, please provide evidence prior to first day of work Covid-19 Nil Full Date of 2 rd dose: Flu Date last received: | ☐ Staff referral (Please | print name of employee | e who referred you) | | |
| Surname: Given name(s): Contact phone: Home Mobile Work Email: | Your details | | | | |
| Contact phone: | Title: □ Rev. | □ Mr □ Mrs | ☐ Miss ☐ Other (pleas | e specify) | |
| Email: | Surname: | | Given name(s): | | |
| Email: | Contact phone: | | | | |
| Do you speak any languages other than English? | Email: | | | | Work |
| Centrelink information (for supported employees only) Type of benefit: | | | | | |
| Centrelink referral? | | • • | _ | (please specify) | |
| Centrelink referral? | Type of benefit: | | a Cantrolink referrel | | |
| Yes, I am an Australian/New Zealand citizen or permanent resident (please provide evidence) Yes, I hold a valid work visa (please attach a copy and provide details below) Type of Visa: | Centrelink referral? | | | | |
| Yes, I hold a valid work visa (please attach a copy and provide details below) Type of Visa: | Are you legally entitle | d to work in Australia | ? | | |
| In the last 10 years, have you spent more than six months in a country while over the age of 16 years? No | ☐ Yes, I am an Austra | lian/New Zealand citize | n or permanent resident (plea | ase provide evide | nce) |
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| Mission? Date employed: | checks) | | | | |
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| Year 12 | □ No □Yes (p | please provide details) | | | |
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| Profession / qualifications held: Registration number | Please provide relevan | t registration/ licence | details below | | |
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| Covid-19 Nil Full Date of 2 nd dose: Flu Date last received: | Trade qualification: | | L | _icence number: | |
| Covid-19 Nil Full Date of 2 nd dose: Flu Date last received: | Vaccination history: | vaccination history is r | equired for the role, please or | rovide evidence r | orior to first day of work |
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Application for Employment Version: 14.0

| Criminal hist | ory check / Working with Children Check | | | |
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| letter, please provi | ted role must obtain/ hold a current Working with Children check. If you already have a clearance de your WWC or APP number:employment that all applicants consent to undergo a criminal history check prior to engagement | | | |
| Have you been coposition? | onvicted of a criminal offence that may prevent you from carrying out the duties related to this | | | |
| □ No □ | Yes (please provide details below) | | | |
| Work Health | & Safety | | | |
| Do you have any have applied? | past or current medical condition which may affect your performance in the role for which you | | | |
| □ No □ | Yes (please provide details below) | | | |
| Do you have any role? | past or current medical condition which may be aggravated or worsened by the duties of the | | | |
| □ No □ | Yes (please provide details below) | | | |
| Please note: You | appointment may be subject to you undergoing a health assessment. | | | |
| Conditions a | ssociated with this application | | | |
| recruitment an will take all rea If my application If offered emply HR Department Manager/Supe If successful, I Code of condu | n will release information on this application form to nominated individuals participating in the d selection process. I am also aware that, under the Privacy Act Amendment (2000), Wesley Mission sonable steps to protect this information. In is unsuccessful, this form shall be kept for no longer than six (6) months before being destroyed. Soyment, this form will become the basis of my personal file, and will be forwarded to Wesley Mission's at, and a copy of this form will be retained at the Centre/Program where I will be employed by the | | | |
| Our Vision | Do all the good you can, by all the means you can, in all the ways you can, in all the places you can, at all the times you can, to all the people you can, as long as ever you can. | | | |
| Our Mission | Continuing the work of Jesus Christ in Word and deed. | | | |
| Our Values | Out of Christian love and compassion, Wesley Mission is driven by - Christlike Servanthood - Unfailing Integrity - Courageous Commitment. | | | |
| | deavours to translate these values into practical policies and behaviour so they actively shape and er of the Mission and the decisions we make within it. | | | |

I have read and understood the above conditions of associated with this application and hereby affirm Wesley Mission's values statement. Furthermore, the information stated on my application for employment is true and correct to the best of my knowledge and belief. I am aware that any false or inaccurate information given by me may prevent my employment or be the cause for my dismissal.

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