# JOB APPLICATION FORM

**APPLICANT SECTION**

|  |
| --- |
| Position applied for: |

|  |
| --- |
| **Personal details** |
| Given name: | Family name: |
| Preferred name: |
| Address: |
|  |
| Telephone | Daytime: | Mobile: |
| Email: |

|  |
| --- |
| **Current qualifications** |
| Qualification title | Institution/training provider | Year completed |
|  |  |  |
|  |  |  |
|  |  |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Are you currently undertaking study/training? (tick one) | [ ]  | Yes | [ ]  | No |
| If yes, course/program name: |
| (tick one) | [ ]  | Full time  | [ ]  | Part time | [ ]  | Distance | [ ]  | Other |

|  |
| --- |
| **Previous employment (most recent first)** |
| Employer name/establishment | Dates from/to | Position held | Reason for leaving | Office usecheckinitial/date |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Do you agree to have referees contacted in relation to this application? (tick one) | [ ]  | Yes | [ ]  | No |
| *(Reference checks will be conducted legally in an ethical manner and all information derived will remain confidential.)* |
| Please provide details of three people who can speak on your behalf regarding your work history. |
| Name | Contact No. | Position held/working relationship (e.g. supervisor) | Office usecheckinitial/date |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| What type of work are you available for? (tick one) | Full time | [ ]  | Part time | [ ]  | Casual | [ ]  |
| When will you be available for work? |  |

|  |
| --- |
| Please provide any other information that you identify as being pertinent to this application (e.g. medical conditions, disabilities) |
|  |
|  |
|  |

**Declaration**

I declare that, to the best of my knowledge, the information given is true and correct. I understand that inaccurate, misleading or untrue statements or knowingly withheld information may result in termination of employment with this organisation. I understand that this application does not constitute an offer of employment. I understand that, in some cases, background checks will be required and I will be notified if this applies to this application.

|  |  |
| --- | --- |
| Signed: | Date: |

 *“Nebraska Minority Resource Center is an equal opportunity employer”*