



An Equal Employment Opportunity Employer

APPLICATION FOR EMPLOYMENT

Instructions:

- Before applying please read 'How to Apply for a Job at STARTTS' available on our website.
- A separate application form must be completed if you are applying for more than one position.
- Submit all documents by the due date by email, post or hand-delivery. **Do Not fax applications.**

POSITION DETAILS

Position Name: _____ Position Number: _____

Where did you see this position advertised: Newspaper name: _____

Internet site: (specify site/s) _____

Other (please specify) _____

PERSONAL DETAILS

Surname: _____ Given Names: _____

Female Male X or Non-binary Previous Names /Aliases: _____

Town & Country of Birth: _____

Telephone (Home): _____ Telephone (Mobile): _____

Residential Address: _____

Suburb: _____ State: _____ Postcode: _____

Postal Address (if different to residential address): _____

Suburb: _____ State: _____ Postcode: _____

Email address: _____

Do you hold a current NSW Driver's Licence: Yes No Driver's Licence Class: _____

Are you an Australian Citizen or Permanent Resident? Yes No

If no, do you hold a current work visa? Yes No

What is your visa sub-class? _____

Visa Restrictions: No Yes *Restrictions Details below:

If called for an interview you must provide a copy of your current passport and current visa.

CURRENT QUALIFICATIONS

If relevant, submit copies of your qualifications with your application or if called to attend interview please bring with you at the time of the interview.

Overseas Qualifications:

If your qualifications are from overseas you must have them assessed in Australia by a recognised assessing, registering and/or licensing body before we can consider them for employment.

If you are selected for interview please bring original or certified copies of your qualifications and/or registration certificates to the interview.

If you have Certificates/Statements of Service from any previous employer which are relevant to the job you are applying form, please also bring them to the interview.

Working With Children Check (WWCC) (If relevant to the role)

Working With Children Check Number. OR Application No.: _____

Expiry Date: _____

OTHER DETAILS

Languages (Optional. If fluency in a language is an essential requirement of the position, please make sure you explain how you meet this requirement in your statement against the selection criteria.)

Please list languages (other than English) spoken or written fluently. (please tick)	Speak	Write

SPECIAL NEEDS (Optional) If you have any special needs to enable you to attend the interview please list them below.

HEALTH

To the best of your knowledge and belief are you in good health? Yes No

Please provide details of any previous or current medical condition or restriction, physical or otherwise, which may affect your ability to perform the essential requirements of the job, and/or any restrictions/requirements which require workplace adjustment.

This must include any medical condition or restriction arising from a previous worker's compensation claim. Failure to provide such information may jeopardise your right to workers' compensation if a pre-existing disability is aggravated at work (*Workers' Compensation Act 1987*). Where it is proved that the worker has, at the time of seeking or entering employment in respect of which s/he claims compensation for a disability, wilfully and falsely represented him/herself as not having previously suffered from the disability a dispute resolution body may in its discretion refuse to award compensation which may otherwise be payable.

Applicants who have a health condition are invited to discuss its relevance or otherwise to their prospects for employment with the interview panel. A disability or injury is NOT a barrier to the consideration of an application for employment.

REFERENCES

Do you agree to have referees contacted in relation to this application? [] Yes [] No

(Reference checks will be conducted in an ethical manner and all information derived will remain confidential)

Provide details of **three** people who can speak on your behalf regarding your work history; as far as possible one referee should be your current supervisor (or immediate past supervisor).

Name	Contact number	Email	Position held/working relationship (e.g. supervisor)

DECLARATION

I declare that the above details are correct, including that my qualifications are genuine.

I understand and agree that:

1. The terms and conditions of my employment will be in accordance with the appropriate Industrial Award or Agreement.
2. It is a condition of my employment that I am willing to work at any facilities of STARTTS should this be necessary.
3. STARTTS will conduct a 'Police Record Check' (CRC) as part of my appointment and if the position is child-related I will provide a 'Working With Children Check' (WWCC) clearance or application number.
4. STARTTS is permitted to verify my qualifications with the appropriate institution.
5. I consent to reference checks which may be necessary to support this application.
6. I consent to information on this form and accompanying documents being held by STARTTS for up to 6 months from date of application if I am unsuccessful. [See *Privacy Statement below.*]
7. I declare that the statements made by me are true, complete and accurate. I understand that false, misleading or dishonest information provided by me may be grounds for dismissal or non-appointment with STARTTS.

Signature: _____ Date: _____

PRIVACY STATEMENT

In accordance with privacy legislation, STARTTS will use the personal information provided by applicants solely for the purpose of making appointments to positions within STARTTS. STARTTS will take all reasonable steps to protect the personal information it collects and uses. It will not disclose such information to any outside organisation. STARTTS will destroy the personal information within 6 months when it is no longer needed for selection purposes, except where the applicant accepts a position within STARTTS. By submitting personal information to STARTTS, applicants are deemed to have given their consent to the collection, use and storage of their personal information for the purpose stated above.

Applications including all documents required should be addressed to **STARTTS Human Resources**, and submitted **by the due date** by one of the following options:

1. **Email (preferred option):** STTS-Jobs@health.nsw.gov.au
2. **Post:** Attention HR STARTTS, PO Box 203 Fairfield NSW 2165