



# Rural City of Wangaratta

## EMPLOYMENT APPLICATION

WSAC OPEN DAY

Full name:		D.O.B	
	<i>First</i> <span style="margin-left: 150px;"><i>Last</i></span>		
Address:		Phone:	
	<i>Street address</i> <span style="margin-left: 150px;"><i>Apt/Unit #</i></span>		
		Email:	
	<i>City</i> <span style="margin-left: 100px;"><i>State</i></span> <span style="margin-left: 100px;"><i>Post Code</i></span>		

Position applied for: **LIFEGUARD / SWIM TEACHER / DUTY MANAGER / CAFÉ ATTENDANT / CUSTOMER EXPERIENCE OFFICER / PERSONAL TRAINER / GYM INSTRUCTOR / GROUP FITNESS**  
*(please circle)*

Preferred Employment Type: Part Time  Casual  Traineeship  Work Experience  Any

Availability:  Before/After School hours  Weekends  Any  
 During School Hours  School Holidays

Are you an Australian Citizen? Yes  No

If no, are you authorized to work in Australia? Yes  No

Do you have a current Working with Childrens Check? Yes  No  Card Number: \_\_\_\_\_ Expiry: \_\_\_\_\_

Do you hold any relevant Qualifications/Licences? Yes  No  If yes, please provide further details \_\_\_\_\_

Do you have any pre-existing medical conditions that may restrict your ability to perform the duties of the role? Yes  No  If yes, please provide further details \_\_\_\_\_

Have you ever been found guilty of a criminal offence, or placed on an alternate corrections order, or are currently under investigation or facing charges for a criminal offence? Yes  No  If yes, explain? \_\_\_\_\_

Do you have any relatives working at the Sports & Aquatic Centre? Yes  No  If yes, who? \_\_\_\_\_

## Previous Employment

Company: \_\_\_\_\_ Phone: \_\_\_\_\_

Job title: \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_

Responsibilities: \_\_\_\_\_

## References

Please provide at least 1 referee who can provide verbal references (referees must not be related to applicant). Please ensure referee's are aware they may be contacted for a reference.

### Referee #1

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Relationship: \_\_\_\_\_ Employer: \_\_\_\_\_

Position: \_\_\_\_\_

### Referee #2

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Relationship: \_\_\_\_\_ Employer: \_\_\_\_\_

Position: \_\_\_\_\_

## Disclaimer and signature

If my application progresses, I agree to undertake training to attain and maintain required qualifications/licences and complete a police check (charges covered by Rural City of Wangaratta).

I certify that my answers are true and complete to the best of my knowledge.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_