Employment Application

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| **ADVERTISED VACANCY DETAILS** | | | | |
| Job Title | | Work Health and Safety Officer | | |
| Job Reference | | HR 12/26 | | |
| **PERSONAL DETAILS** | | | | |
| Mr  Ms  Mrs | | | | |
| Surname | |  | | |
| Other Names | |  | | |
| Address for Notification | |  | | |
| Contact Phone | |  | | |
| Email | |  | | |
| Are you an Australian Citizen or Australian Permanent Resident?  Yes  No | | | | |
| If no, are you legally entitled to work in Australia?  Yes  No | | | | |
| If yes, please provide specific details | | | | |
| Have you worked for Shire of Augusta Margaret River previously?  Yes  No | | | | |
| Do you have a current Australian drivers licence?  Yes  No | | | | |
| If Yes, which state? Type and Number | | | | |
| **CRIMINAL CONVICTIONS** | | | | |
| *You do not need to give details for any conviction which you have declared spent (West Australian Spent Convictions Act 1988). 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* | | | | |
| Have you ever been convicted of a criminal offence that might be relevant to the requirements of the job for which you are applying?  Yes  No | | | | |
| If yes, please provide details including the nature of the offence, date and penalty imposed | | | | |
| **HEALTH** | | | | |
| *A medical condition or disability is not a barrier to the potential offer of employment. However, to assist in assessing opportunities for placement, please answer the questions below truthfully* | | | | |
| Do you have any impairment or condition which would affect your ability to perform the job for which you have applied?  Yes  No | | | | |
| If Yes, what could Shire of Augusta Margaret River do to accommodate you so that you are able to perform this job? | | | | |
| **SELECTION CRITERIA** | | | | |
| *Applicants must respond to all of the selection criteria documented below in order to be considered for the role. Wherever possible provide examples of your work performance in your responses to the selection criteria, do not simply state that you meet the selection criteria. In order to adequately address each selection criterion, and therefore increase your chances of securing an interview, it is suggested applicants follow the S.A.O (Situation, Action, Outcome) guideline in each specific criteria. That is, describe a Situation that you have experienced (relevant to the selection criteria), then write about the Action you performed to address this requirement and then describe the Outcome of what you achieved as a result of your action and involvement.* | | | | |
| 1. Demonstrated experience in providing WHS advisory services and support to internal and external stakeholders. | | | | |
| 1. Demonstrated experience in the development and review of SSoW documentation, including Safe Working Method Statements, Job Safety Analysis, Risk Assessment and Safe Work Instructions. | | | | |
| 1. Proven experience in Workers Compensation claims administration and injury Management, including Return to Work Plans and Fitness for Work assessments. | | | | |
| 1. Demonstrated ability to promote a constructive and collaborative safety culture across diverse teams and work environments. | | | | |
| **REFEREES** | | | | |
| *Please provide details of current or previous supervisors/managers/work referees that we may confidentially contact to confirm details of your previous employment. By providing this information and signing this application you give Shire of Augusta Margaret River the rights to contact your referees listed to verify your employment background* | | | | |
| Name, Position & Company name |  | | Email Address: |  |
| Relationship |  | | Contact No: |  |
| Name, Position & Company name |  | | Email Address: |  |
| Relationship |  | | Contact No: |  |
| Name, Position & Company name |  | | Email Address: |  |
| Relationship |  | | Contact No: |  |
| **VERIFICATIONS OF QUALIFICATIONS** | | | | |
| *Please submit copies of relevant qualifications with your application. Shire Augusta Margaret River requests the rights to contact the relevant institution to verify your qualifications outlined in this application* | | | | |
| Do you give Shire Augusta Margaret River the right to verify your qualifications?  Yes  No | | | | |
| **HOW DID YOU HEAR ABOUT THIS VACANCY** | | | | |
| Internal advertising  Vacancy subscription email  SEEK  AMR Shire website  Word of Mouth  Newspaper Advertising  Facebook \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | |
| **DECLARATION AND CONSENT**   * I confirm that the information given on this form is true and complete. * I acknowledge that if I am hired and it is found that I have provided false or misleading information then my employment may be terminated. * I can provide evidence that I am eligible to work in Australia (e.g. birth certificate or visa). * I consent to Shire Augusta Margaret River contacting my referees and using, disclosing and storing the information obtained from my referees to assess my suitability for employment at Shire Augusta Margaret River * I consent to Shire Augusta Margaret River verifying any fact which is set out in this application (including any position held, bankruptcy status and educational qualifications) and to the information obtained from this check to be collected, used and disclosed by Shire Augusta Margaret River and the agent it uses to perform the relevant checks. * I understand that there is no obligation by Shire Augusta Margaret River to provide me with employment.   I consent to Shire Augusta Margaret River keeping my details on file for a period of up to 12 months for the purpose of assessing my suitability for employment in any other position for which Shire Augusta Margaret River may consider I may be suitable given my skills and experience.  Signed:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Dated: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | |