

JOB APPLICATION COVER SHEET

This form must be completed and be attached as part of your application.

VACANCY DETAILS

Title of position Position No.

Classification/Level Location

YOUR PERSONAL DETAILS

Preferred Title Mr Mrs Ms Dr Other ()

Surname Given name(s)

Address

Postal Address
(If different from above address)

Telephone Numbers Home Mobile Work

May we contact you at work? Yes No

Are you an Australian Citizen? Yes No Date of Birth (optional)

Please specify any special requirements for interview.

YOUR EMPLOYMENT DETAILS

Are you currently employed? Yes No

Name of your employer Position Title

Are you currently employed under the Public Service Act? Yes No

If yes, please complete the following

Employment Status Ongoing employee Non ongoing employee

Actual Classification AGS No.

Nominal Classification

Have you received a redundancy payment from the Australian Government in the last 12 months? Yes No

REFEREES

	REFEREE 1	REFEREE 2
Name (include title, if appropriate)		
Employer		
Position		
Contact Number		
Relationship to Applicant		
Period of Relationship		