



## EMPLOYMENT APPLICATION FORM.

(READ CAREFULLY BEFORE ANSWERING ANY QUESTIONS)

The information supplied in this application will remain strictly confidential between the applicant and Interline. This application must be completed in the applicant's own handwriting.

**Position Applied for:** Driver / Clerical / Mechanic/Cleaner - please circle      **Date:**

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**Personal Information:**

Surname:	First Name:	
Address:		
State:	Postcode:	Telephone Number:
Date of Birth:	Age:	Place of Birth:
Next of Kin:	Relationship:	Next of Kin Phone:

**Licence Details:**

Drivers Licence Number:	Drivers Authority Number:
Licence Expiry Date:	Type:                      State Issued:
Do you have any DUI, traffic or criminal convictions? Are any pending? If yes please attach details:	

Are you a member of the Transport Workers Union?                      Yes                      No

**Medical History.**

Describe your current state of health (circle) Very Good / Good / Average / Poor		
Number of sick days taken in the last year of full time employment:		
Height:	cm	Weight kg
Do you smoke cigarettes, cigars, pipes etc No / Yes How many per day:		
Please circle the appropriate answer: If yes, please provide details		
Do you have high blood pressure?	No	Yes
Do you have low blood pressure?	No	Yes
Do you have any back problems?	No	Yes
Do you wear glasses/contact lens?	No	Yes
Do you suffer from:		
Epilepsy	No	Yes
Diabetes	No	Yes
Migraine	No	Yes
Chest or Heart problems	No	Yes
Blackouts/dizziness	No	Yes
Do you have any physical disabilities	No	Yes
Will you undergo a medical examination at this Company's expense? No Yes		
Have you ever claimed Workers Compensation? No Yes If yes, give details of the type of injury, date of injury and the time you were unable to carry out normal duties.		

**Employment History. (Last 3 )**

	(1)	(2)	(3)
Company			
Position held			
Start date			
Finish date			
Relevant experience			
Reason for leaving			
Contact			

**\* Please supply a copy of your Employment History.**

**Education & Training.**

Highest level completed	Secondary:	Tertiary:
Additional Trade/Qualifications:		
Details of any Advanced Driver Courses attended:		
Details of any current training/studies currently undertaken.		



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## **Certificate of Application.**

I hereby certify all the statements contained herein are true to the best of my knowledge and belief and understand that any misstatement of material facts contained in this application will be cause for rejection of this application, removal of my name from eligible list or discharge from the Company; I further understand and agree that

- Uniforms when supplied by the Company will be worn at all times whilst on duty and remain the property of the Company
- I am aware that from time to time during the course of my employment, I may be given possession of certain property owned by you, and I am also aware that during the performance of my duties, cash collected from passengers or otherwise, may come into my possession. I acknowledge that the said items, and any other items of property placed or coming into my possession will always remain your property and that I shall at all times while I am in possession of the said property stand possessed of the said property as your bailee and that I will at all times (whether I am on or off duty) be obliged to take all reasonable care to protect the said items of property from loss or damage whatever kind. I also acknowledge that should any such property be lost or damaged by reason of my failure to take reasonable care of them, I will be responsible for rectifying such damage, or in the case of loss or irreparable damage, I will be responsible for repaying to you the value of the items of property concerned. I also agree to return to you on demand any and all property of which may be in possession as your bailee at any time either or after the term of my employment with you.
- I authorise and request you to deduct from my monies which may from time to time be due and payable by you to me whether in respect to wages, holiday pay or otherwise the value of any such property which may be lost or irreparable damaged and the AMOUNT OF ANY SUCH CASH.
- Any appointment within the Company may involve a shift or any other work loading, may be subject to transfer to a position without such loading.
- Commencing times must be observed and repetitive lateness will result in a review of my continued employment with the Company.
- I will observe Company requirements on entry to areas designated for authorised personnel and for staff parking.
- The consumption of alcohol within 8 hours of commencing duty, or during duty including meal breaks, will result in instant dismissal.
- Keys issued to me for entry into an area of Interline premises will not be duplicated and at all times remain the property of the Company.
- I agree to abide by all Company safety (and other) standards as listed in the manual's issued and those that may be posted on the various notice boards throughout the premises. I understand that the Company reserves the right to dismiss any employee for breach of rules or regulations (standards) including safety standards.
- I will provide evidence of my date of birth, and I shall present myself for a medical examination, if so requested.
- I authorise the Company to lodge my pay into a suitable bank account as arranged by the Company under it's Direct Bank Scheme for payroll.
- I acknowledge that I must serve a probationary period of three months, during which time the Company may terminate my duties without giving any reason for doing so.
- I WILL NOT SMOKE ON DUTY.
- I understand that the submission of this application does not in itself constitute a contract of employment. However, should I accept the position with the Company; all the above conditions will be binding by me.

**Signature of Applicant:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Print Name:** \_\_\_\_\_

**Thank you for taking the time to complete this application.**

Witnessed by: \_\_\_\_\_ Signature: \_\_\_\_\_

**OFFICE USE ONLY.**

**Interview with applicant:**

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**Result of driving test:**

Please circle PASS FAIL

Driving test mark.....%

**Recommendation** (please circle)

Employ now Employ when vacancy arises  
Potential for employment Employment not recommended

<b>Appointment Details</b>	
Start date	
Classification (please tick)	Permanent  Casual  Casual / Casual on call
Base wage:	
Special Conditions (if any)	
Employment Number:	
<b>Bank Details</b>	
Bank Name:	
Account Type:	
Branch Number:	

Account Number: