



**APPLICATION FOR EMPLOYMENT - REMOVALIST**

Date of Application \_\_\_\_\_ Position applied for \_\_\_\_\_

Surname \_\_\_\_\_ Given Names \_\_\_\_\_

Address \_\_\_\_\_ Suburb \_\_\_\_\_ Postcode \_\_\_\_\_

Home Phone \_\_\_\_\_ Mobile Phone \_\_\_\_\_

Date of Birth \_\_\_\_ / \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Your current salary \$ \_\_\_\_\_

Do you have a Tax File Number (TFN)? Yes \_\_\_\_\_ No \_\_\_\_\_ (To be provided if successful)

Do you hold a current Driver's Licence? Yes \_\_\_\_\_ No \_\_\_\_\_ Licence class \_\_\_\_\_

(Licence details will be verified in accordance with State requirements)

Do you have Fork lift licence? \_\_\_\_\_ AFRA Accreditation? \_\_\_\_\_ Blue card? \_\_\_\_\_

What is your preferred time away from home? Constantly / Regularly / Occasionally / Never

**EXPERIENCE**

How many years experience have you had in the furniture removal industry? \_\_\_\_\_

Have you had experience with the following?

Do you feel competent with the following?

Pack: Yes \_\_\_\_\_ No \_\_\_\_\_

Pack: Yes \_\_\_\_\_ No \_\_\_\_\_

Inventory: Yes \_\_\_\_\_ No \_\_\_\_\_

Inventory: Yes \_\_\_\_\_ No \_\_\_\_\_

Loading: Yes \_\_\_\_\_ No \_\_\_\_\_

Loading: Yes \_\_\_\_\_ No \_\_\_\_\_

International wrapping: Yes \_\_\_\_\_ No \_\_\_\_\_

International wrapping: Yes \_\_\_\_\_ No \_\_\_\_\_

**PREVIOUS EMPLOYMENT** (List most recent position first). If resume attached, do not complete

| DATES FROM /TO | POSITION HELD | COMPANY | REASON FOR LEAVING |
|----------------|---------------|---------|--------------------|
|                |               |         |                    |
|                |               |         |                    |
|                |               |         |                    |
|                |               |         |                    |

**PROFESSIONAL REFEREES**

| NAME | POSITION | COMPANY | CONTACT NUMBER |
|------|----------|---------|----------------|
|      |          |         |                |
|      |          |         |                |
|      |          |         |                |
|      |          |         |                |



Have you ever been convicted of any criminal offence? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, state particulars: \_\_\_\_\_

Are you on a prohibited list of working with children? Yes \_\_\_\_\_ No \_\_\_\_\_

**PHYSICAL RECORD**

Have you ever received any serious injury? Yes \_\_\_\_\_ No \_\_\_\_\_

Have you ever had any serious illnesses? Yes \_\_\_\_\_ No \_\_\_\_\_

Do you have any deformity or physical impairment? Yes \_\_\_\_\_ No \_\_\_\_\_

Is your eyesight or hearing in any way deficient? Yes \_\_\_\_\_ No \_\_\_\_\_

Do you have any pre-existing injuries or illness? Yes \_\_\_\_\_ No \_\_\_\_\_

Have you ever applied for Worker's Compensation? Yes \_\_\_\_\_ No \_\_\_\_\_

If you have answered Yes to any of the previous physical record questions, please state particulars

\_\_\_\_\_  
\_\_\_\_\_

**TO BE READ AND SIGNED BY ALL APPLICANTS**

It is agreed and understood that:

1. Completing this application will in no way assure that I will be employed.
2. This application was completed by me; all entries and information on it are true and complete to the best of my knowledge and any misrepresentation of information given shall be considered an act of dishonesty and I understand that any falsification or misrepresentation herein could result in my discharge in the event that I am employed by A+R Removals. I will furnish freely any such information or documents that may be required to complete my employment file.
3. I hereby authorise A+R Removals to investigate my previous record of employment to ascertain any and all information which may concern my record whether same is of record or not and I release my former employer from all liability for any damages on account of furnishing such information.
4. In the event of my leaving A+R Removals for any cause I authorise A+R Removals to answer any and all enquiries as to my conduct and qualifications while working for the company, and reason for leaving.
5. I agree that whenever I leave A+R Removals either voluntarily or involuntarily, I will return all company property, including all uniforms issued to me. Otherwise, I understand the cost is to be paid by me.



6. Where necessary, I understand that A+R Removals will require me to complete a Consent form to undergo a screening process in line with the Child Protection. (Prohibited Employment) Act 1998.

7. If A+R Removals requires, I consent to undertake a medical examination at the company's expense and I authorise the release of any relevant information associated with any pre-existing condition/ailment to the company, provided that such information is treated with sensitivity and confidentiality.

8. If A+R Removals requires, I consent to undertake a drug test that is required for entry into certain work places.

9. If offered employment with A+R Removals, I understand that my employment conditions are as expressed in the policies, procedures and standard conditions of employment which are contained in the **Employment and Safety Handbook**. This handbook will be issued to me on commencement of employment for my information and acknowledgement.

Signature \_\_\_\_\_ Date \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ /

**OFFICE USE ONLY**

Comments \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_