



AQUAPONICS WA

295 Warton Road Canning Vale Western Australia 6155
Phone (08) 9455 2133 | admin@aquaponicswa.com.au | hydroponicxpress.com.au

APPLICATION FOR EMPLOYMENT

Surname: _____ First name/s: _____

Address: _____ Postcode: _____

Email: _____ Contact number: _____

Emergency contact name: _____ Emergency contact phone: _____

Drivers license: Yes No Manual / Auto? (circle) Drivers license #: _____

Forklift license: Yes No Year obtained _____ Is it current? Yes No

What type of work are you interested in? Full time Part time Casual

What days are you available to work? Mon Tue Wed Thu Fri Sat Sun

Are there any days/hours that you will be unavailable to work? _____

Have you ever been convicted of a crime? Yes No Do you currently use illegal drugs? Yes No

Please provide details _____

In the last five years, have you been involuntarily discharged from a position? Yes No

Are you, or have you engaged in the last six months in any activities that may compromise or affect this application?

Are you a citizen of Australia /NZ? Yes No

If no, are you authorised to work in Australia? Yes No (If yes, please attached work visa to the application)

What languages can you read, speak, or write fluently?

Please tell us your secondary and tertiary education history (e.g. complete Year 12, Uni Degree, Trade Certificate etc.)

Do you have any responsibilities other than work that will interfere with specific job requirements?

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The inherent requirements of the role involves the following functions:

- Repetitive bending and stooping
- Frequent ladder climbing
- Frequent twisting
- Regular lifting of weights
- Reaching and stretching
- Repetitive gripping and handling
- Standing / walking for extended periods
- Work above shoulder height

Do you have any reasons such as injuries, illnesses or disabilities of which you are aware that may affect your ability to work in this position or perform any tasks?

Please let us know about your previous employment history:

Employer	Dates (to - from)	Position Title
_____	_____	_____
_____	_____	_____
_____	_____	_____

Do you agree to have referees contacted in relation to this application? Yes No
(Reference checks will be conducted legally in an ethical manner and all information derived will remain confidential.)

Please provide details of three people who can speak on your behalf regarding your work history

Name	Contact number	Position Held / Working Relationship
_____	_____	_____
_____	_____	_____
_____	_____	_____

If you have anything you would like to include that may help your application, please detail:

Aquaponics WA is a smoke free premises.

DECLARATION: I declare to the best of my knowledge the information given is true and correct. I understand that inaccurate, misleading or untrue statements or knowingly withheld information may result in termination of employment with this organisation. I understand that this application does not constitute an offer of employment. I understand that, in some cases, police and credit checks will be required.

Signed: _____ Date: _____