

Job Application Form



PLAN • CONNECT • LIVE

PO Box 416
 Innisfail QLD 4860
 Supporting the Cassowary Coast & Surrounding Regions
 Mobile | Anthony 0408 535 331
 Alison 0428 818 550
 Website | www.lifeurway.com.au
 Email | admin@lifeurway.com.au

Today's Date: _____

Full Name: _____

Phone: _____

Email Address: _____

Current Address: _____

Town / City: _____ Postcode: _____

Have you had your first two Covid vaccinations: Yes / No (Required)

Do you have any other work commitments: Yes / No

If yes,

Please provide details: _____

Licenses, Cards and Certificates

| <i>License / Certificate</i> | <i>Yes</i> | <i>No</i> | <i>Expiry date</i> |
|-----------------------------------|------------|-----------|--------------------|
| <i>NDIS Worker Screening card</i> | | | |
| <i>Working with children card</i> | | | |
| <i>Driver Licence</i> | | | |
| <i>First Aid/CPR certificate</i> | | | |
| | | | |
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Availability for Work (Place a (√) when your available or insert specific times in the corresponding box (eg Wed 0700-1100))

| Time | MON | TUES | WED | THUR | FRI | SAT | SUN |
|-----------|-----|------|-----|------|-----|-----|-----|
| 0000-0600 | | | | | | | |
| 0600-1200 | | | | | | | |
| 1200-1800 | | | | | | | |
| 1800-0000 | | | | | | | |