

**SHIRE OF KONDININ
APPLICATION FORM FOR
EMPLOYMENT**



* Please attach a copy of current resume.

CONFIDENTIAL

POSITION: _____

SURNAME: _____ **GIVEN NAME/S** _____

ADDRESS: _____

TELEPHONE: HOME _____ **BUSINESS** _____

DATE OF BIRTH: _____

DRIVER'S LICENCE INFORMATION: NUMBER _____

CLASS _____

BLUE CARD NO: _____

QUALIFICATIONS: Please list any technical training, professional qualifications and/or special skills training:

PROFESSIONAL AFFILIATIONS:

REFERENCES: Please provide names/addressed and telephone numbers of two referees who have supervised your work and whom we may contact:

DATE ABLE TO COMMENCE EMPLOYMENT: _____