The Parkside Foundation



CASUAL EMPLOYEE APPLICATION

Please complete the Casual Employee Application Form and return together with your resume to:

The Parkside Foundation 11 Tullah Road Mornington TAS 7018

OR

Email to: recruitment@parkside.org.au

The Interview:

If you are successful in attaining an interview you will be advised of the date, time and place. It is vital that you are punctual and properly prepared for the interview.

Please bring to the interview:

- current Driver Licence
- current First Aid certificate
- current National Police check and/or WWVP if available
- any relevant certificates or qualifications

Selection:

If you are successful following the interview and referee reporting stages, you will be offered a position subject to the following:

- 1. Satisfactory completion of the pre-employment medical assessment.
- 2. A clear record being attained from the National Police check (Aged Care) / Working With Vulnerable People (Disability).
- 3. A current Driver Licence.
- 4. Agreement to abide by The Parkside Foundation Codes of Conduct.
- 5. Acceptance of the terms and conditions of The Parkside Collective Agreement.
- 6. All staff are subject to a three month probation period.

Good luck with the application!

The Parkside Foundation



Name:		Las	st Name:			
Address:		Co	ntact Number:			
Date of Birth:		Ema	ail:			
Why are you interested in wor as a support wor						
C. People with physical D. People with intellectu		B. People with dementiaC. People with physical disabiliD. People with intellectual disabiliIf you have answered "Yes" to a	bilities	ease provide	Yes	No
Do you have any additional skills to you can bring to position (eg, do y speak another language?)	that the					

The Parkside Foundation



Please describe the times and days you are available for work:							
OTHER		Do you have a current Driver Licence? Do you have your own vehicle? Do you have a current First Aid certificate? Have you undertaken any training as a support worker. If "Yes" please provide details.				Yes	NO
Have you applied	for a p	osition with The Parkside	Foundatio	n befo	re?	Yes/No	
Please provide the	name (of two referees:					
Name:			Name:				
Professional Relationship:			Profess Relation				
Contact Number:			Contact Number:				
Signature of applicant:					Date:		

Please attach a copy of your Resume with this application.