

Bliss Home Care Services
CLEANING TECHNICIAN APPLICATION FORM

APPLICANT INFORMATION

First Name:	Surname:	Date of Birth:
Address:		Suburb:
P/Code:	Home Phone:	Mobile:
Email:		

IDENTIFICATION

License Number:	State:	Expiry:
Birth Cert:	State:	
Passport:	Country:	Expiry:
Are you an Australian Resident? Yes / No		Are you legally eligible to work in Australia? Yes / No
Do you have a working Visa: Yes / No		Expiry:

EMERGENCY CONTACT 1

1-Name of a relative not residing with you:		
Address:	Phone:	
Suburb:	State:	Post Code:
Relationship:		

Emergency contact 2

2-Name of a relative not residing with you:		
Address:	Phone:	
Suburb:	State:	Post Code:
Relationship:		

WORK HISTORY (MOST RECENT FIRST)

Previous Employment:		
Employer address:		
Suburb:	Post Code	Phone Number:
Contact Name:	Employment Dates	From _____ to _____
Position Held:		
Reason for Leaving:		
Can we contact this employer? Yes / No:		

WORK HISTOY 2

Previous Employment:		
Employer address:		
Suburb:	Post Code	Phone Number:
Contact Name:	Employment Dates	From _____ to _____
Position Held:		
Reason for Leaving:		
Can we contact this employer? Yes / No:		

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OTHER REFERENCES		
NAME	POSITION	PHONE

SECURITY INFORMATION (please circle)

Have you ever been convicted of a criminal offence? Yes / No

Please Explain:

Have you ever claimed for workers compensation? Yes / No

Please Explain:

Do you have a car? Yes / No

Is your car insured? Yes / No

What days and hours are you available to work on the following days?

Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
_____ to _____	_____ to _____	_____ to _____	_____ to _____	_____ to _____	_____ to _____	_____ to _____

Do you have current police report? Yes / No

Do you have current working with children report? Yes / No

Note: Due to security and sensitive nature of the job, all employees are required to obtain valid police report and working with children report. As a matter of policy company conducts a police background and driving record check on any applicants.

APPLICANT'S STATEMENT

I certify that the information I have provided in this application is true and correct and has been completed to the best of my knowledge and ability. I understand that any falsification or omission in my interviews or any other company record, may be sufficient reason for not to hire me or may be reason for termination of agreement. I hereby authorize the company, to which I am applying, to conduct any investigation necessary concerning any part of my background related to the position I am seeking, including, but not limited to, obtaining a police report any other relevant report. I authorize any of the persons or organisations named in this application to provide complete information and records regarding my employment, character and qualifications. I release all parties from any liability in connection with the provision and use of such information.

[] YES [] NO

I HAVE READ, UNDERSTAND AND AGREE WITH THE ABOVE.

APPLICANT SIGNATURE: _____ **FFG** _____ DATE: _____

OFFICE USE ONLY

Police Check <input checked="" type="checkbox"/>	Working with Children <input type="checkbox"/>	Interview Date /.... /.....	Approved <input checked="" type="checkbox"/>
Car <input type="checkbox"/> Insurance <input type="checkbox"/>	Work Visa <input type="checkbox"/> ID Papers <input type="checkbox"/>		Declined <input type="checkbox"/>

This application is current for only 60 days from the date above signed. At the conclusion of this time, if we have not heard from the applicant and still wish to be considered for employment, it will be necessary to fill out a new application.