



Application for Employment

PERSONAL INFORMATION

DATE: _____

NAME _____

DATE OF BIRTH _____

ADDRESS _____

CITY _____ STATE _____ POSTCODE _____

PHONE _____ EMAIL _____

MEDICAL HISTORY *(Please detail any medical history that could interfere with undertaking any duties)*

EMPLOYMENT AND SCHOOLING INFORMATION

POSITION SOUGHT

☐ CASUAL

☐ FULLTIME

NSW COMPETENCY CARD

☐ RSA (A) * **must have**

☐ RCG (G) * **must have**

☐ ARCG (C) * *desirable*

PLEASE NOTE: You must have **NSW RSA & RCG** competency cards to be considered for employment

EDUCATIONAL HISTORY *(Begin with most recent)*

YEAR	INSTITUTION	QUALIFICATION

EMPLOYMENT HISTORY

EMPLOYER	
PERIOD OF EMPLOYMENT	
POSITION	
DUTIES	
REASON FOR LEAVING	
EMPLOYER	
PERIOD OF EMPLOYMENT	
POSITION	
DUTIES	
REASON FOR LEAVING	
EMPLOYER	
PERIOD OF EMPLOYMENT	
POSITION	
DUTIES	
REASON FOR LEAVING	

REFEREES

	NAME	COMPANY	POSITION	CONTACT
1.				
2.				
3.				

RESUME ATTACHED

☐ YES

☐ NO

AVAILABILITY

	DAY (9:00am – 5:30pm)	NIGHT (5:00pm – 10:30pm)	LATE NIGHT (10:00pm – 6:00am)
MONDAY	☐	☐	☐
TUESDAY	☐	☐	☐
WEDNESDAY	☐	☐	☐
THURSDAY	☐	☐	☐
FRIDAY	☐	☐	☐
SATURDAY	☐	☐	☐
SUNDAY	☐	☐	☐

GENERAL

Is there anything you would like to add to support your application?

DECLARATION

1. I here-by declare that the statements made by me on this application are true and correct and that a false declaration renders me liable for dismissal.
2. I will abide by company rules and policies as declared to me or contained in the staff handbook, manuals and emails.
3. I will agree to retain the confidentiality of Club documents, systems, manuals and financial reports and I understand that not doing so may be grounds for dismissal.
4. I understand that should I take a position with the Club, I will be fully briefed about the Club's attitude and rules towards Responsible Service of Alcohol and that under the Registered Club's Act, I can be held personally responsible for any breach.

Signature: _____