STAFF APPLICATION FORM

HORNSBY RSL CLUB

Please complete this form, attach your resume' and copies of RSA and RCG certificates and deliver it personally to our Duty Manager who will be giving you a brief interview.

1. CONTACT DETAILS

MR ☐ MRS ☐ MS ☐ MISS ☐		Date of application:
First name:	Surname:	D.O.B:
Email:	Address:	
Suburb:	State:	Postcode:
Home:	Mobile:	Work:

2. ELIGIBILITY

Are you over 18 yrs? Yes ☐ No ☐	Are you a permanent resident or citizen of Australia? Yes ☐ No ☐

If not a resident or citizen are you legally permitted to work in Australia? Yes ☐ No ☐

If you are on an Australian visa, indicate type and number: Type: Number:

If you are on an Australian visa, please provide your passport number:

Do you speak any other languages? Yes ☐ No ☐	What language(s)?

3. AVAILABILITY FOR WORK *Place a tick in the box to indicate when you are available to work*

DAY OF WEEK	ALL DAY (TICK)	AM COMMENCE	PM COMMENCE	NOT AVAILABLE (PLEASE PROVIDE REASON)
MONDAY				
TUESDAY				
WEDNESDAY				
THURSDAY				
FRIDAY				
SATURDAY				
SUNDAY				

PLEASE NOTE: *All staff need to be available on Thursday, Friday and Saturday nights due to peak club trading.*

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4. WORK TYPE & STATUS YOU ARE APPLYING FOR *Place a tick in the box to indicate where you would like to work*

Bar ☐ Food & Beverage ☐ Administration ☐ Gaming ☐ Cellar ☐ Reception ☐

Status: Part time ☐ Full time ☐ Casual ☐

5. EDUCATION AND QUALIFICATIONS

CERTIFICATE	YEAR OBTAINED	INSTITUTION

6. LICENCES AND CERTIFICATES OBTAINED *Place a tick in the box*

Responsible Service of Alcohol Certificate ☐ Responsible Conduct of Gaming Certificate ☐

NSW First Aid Certificate ☐ Australian Driver's Licence ☐ Security Class 1ABC Licence ☐

Other Certificates:

6. EMPLOYMENT HISTORY *If you have attached your resume, do not fill out this section*

POSITION	STARTING	ENDING	ORGANISATION	RELEVANT SKILLS OBTAINED

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8. REFEREE'S *Should be work related*

Please note: By giving the names and contact numbers of these referees you are giving consent for Hornsby RSL Club to contact them.

Referee No. 1

Name:	Work title:	
Company:	Email:	Contact number:

Referee No. 2

Name:	Work title:	
Company:	Email:	Contact number:

9. PERSONAL HISTORY

Have you been convicted of a criminal offence withing the past 5 years? Yes ☐ No ☐

Have you ever been convicted of an offence relating to theft, dishonesty or gaming? Yes ☐ No ☐

If you answered "YES" to any of the above questions, please provide further details below:

10. PERSON TO NOTIFY IN ASE OF ACCIDENT OR ILLNESS

Name:	Relationship:	Contact:

Address:

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11. HEALTH CONCERNS

Are you aware of any health problem or mental health condition likely to affect your work performance?

Please tick

Yes ☐ No ☐

12. PROBATION

I understand and accept that as a condition precedent to my obtaining the position applied for, i shall have to undergo a probationary period of 6 (six) month. At the end of this period the Club may, at it's sole discretion, confirm or annul the appointment

13. DECLARATION

I further declare that the statements made by me in this application are true, complete and correct. I understand that a false or misleading answer to any question in this application will be regarded as misconduct and will be grounds for my dismissal from employment. I also understand that as a hospitality venue i am expected to work: early mornings, nights, public holidays and weekends as required.

*** I, the undersigned, confirm that i have attached relevant certificates and a copy of my Resume.**

Employee Name	Employee Payroll #	Employee Signature

Recruitment of new staff takes place on a "as need" basis. You will be contacted by phone if required to attend an interview

FOR OFFICE USE ONLY

Name of interviewer: DATE

Comments:

Attitude:	Interview recommended: Yes ☐ No ☐