



Application for Employment

LTQ Engineering Pty Limited

Personal Particulars

| | | | |
|------------------------------|--|--------|--|
| Full Name: | | | |
| Address: | | | |
| Position applied for: | | | |
| Date of Birth: | | Age | |
| Home Telephone | | Mobile | |
| Email Address | | | |
| Available date to start | | | |
| Australian Residency Status: | Are you an Australian or New Zealand citizen, or hold Permanent Australian Residency ? <input type="checkbox"/> Yes <input type="checkbox"/> No | | |

Career History:

| Employer | From | To | Position | Reason for leaving | Salary (optional) |
|----------|------|----|----------|--------------------|-------------------|
| | | | | | |
| | | | | | |
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| | | | | | |
| | | | | | |

Education:

| | Course Name/Qualification | Start | Finish | Name of Institution | Year Completed |
|--------------------|---------------------------|-------|--------|---------------------|----------------|
| Secondary | | | | | |
| Tertiary | | | | | |
| Other (incl Trade) | | | | | |

Referees

| Name | Relationship to yourself | Company | Phone | Email |
|------|--------------------------|---------|-------|-------|
| | | | | |
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PC Literacy

Please list any computer programs with which you are familiar and your level of competence in each (ie. beginner, intermediate, advanced):

| Microsoft Office Product | Basic | Intermediate | Advanced |
|--------------------------|--------------------------|--------------------------|--------------------------|
| Word | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Excel | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Email | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Other (Specify) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

| | | | |
|---------------------|--|-------|--|
| Applicant Signature | | Date: | |
|---------------------|--|-------|--|

Office Use Only

Comments:

| | | |
|-----------------------|------------------------------|-----------------------------|
| Accept | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Interviewed by | | Date |
| References Checked By | | Date |
| Commencement Date | | Level Assessed |