

ECHO

EMPLOYMENT APPLICATION

Please return to:
HR Manager
Level 3 2A Cambridge Street
Box Hill 3128
OR
FAX: 9890 287171

PERSONAL INFORMATION

Name: _____

Are there any other names you are also known by? (i.e. maiden name) _____

Home phone: _____ Mobile: _____

Email: _____

Address: _____

Do you have a legal right to work in this country? YES / NO

Do you have an illness or injury that could prevent your from fulfilling your duties? YES / NO

If yes, describe the function that cannot be performed: _____

Have you been convicted within the past seven year of a misdemeanour or felony? YES / NO

If yes, give dates and explanation (*conviction does not automatically exclude you from consideration of employment and you will be given the opportunity to explain any convictions*)

Do you have a Drivers Licence? YES / NO

Manual or Automatic: _____

Have you ever applied to or worked for ECHO before? YES / NO

If yes, please specify date: ____ / ____ / ____

IN CASE OF AN EMERGENCY CONTACT DETAILS

Name: _____

Relationship to you: _____

Home: _____ Work: _____ Mobile: _____

EMPLOYMENT DESIRED

Position you are applying for: _____

How did you hear about this position? _____

Employment required: Full-time / Part-time / Temp

Days and hours you are available for work: _____

If hired, on what date can you start work? _____

Salary requirement: _____

Signed: _____ Date: _____