

# A J Bush & Sons Pty Ltd

(Note: All applicants must be a minimum 15 years of age)

## Application For Employment

Date: \_\_\_\_\_

Position applied for : \_\_\_\_\_  
 Location : \_\_\_\_\_

Full Time Yes      No  
 Casual/ Part Time Yes      No  
 Own Transport Yes      No

BLOCK LETTERS PLEASE

(Please Circle)

Miss Mrs Ms Mr	Surname		First Names		
	Street & Number				Suburb
	State	Postcode	Date of Birth	Tel.	
	Emergency Contact Name:				Tel.

Have you ever worked for A J Bush & Sons Pty Ltd in the past? Yes      No  
 If YES, please give details below. (Please Circle)

Date From	Date To	Location	Position	Manager Name

Reason For Leaving


### Employment history. Show three previous jobs (most recent first)

Employer name & address	Employed	Position	Reason for leaving
	From		
	To	Telephone	
	From		
	To	Telephone	
	From		
	To	Telephone	

What is the highest level of schooling completed? (eg: Year 9, 10, 11, 12)


What month and year did you last attend school full- time?

Month  Year

Since leaving school have you attempted any courses or obtained any qualifications?


Do you have any illness, physical injury or disability which may affect your work?


Have you ever in the past had any work related injuries, illness or disease? Yes      No  
 If YES, give details including workers compensation claims either settled or ongoing. (Please circle)

Date	Nature of injury	Employer	Time off work	Settled or ongoing

(Continued on the other side)

**ALL APPLICANTS:**

AJ BUSH & SONS PTY LTD is an equal opportunity employer and advocates a harassment free workplace, as per company policy.

Harassment is any physical or verbal behaviour, and/or inclusive of a sexual nature that is unwanted, uninvited and nonreciprocated. It is unlawful discrimination under the NSW Anti-Discrimination Act and the Federal Sex Discrimination Act. "No transgression of this policy will be tolerated."

**I hereby declare all information given is true and complete.**

AN INCOMPLETE APPLICATION OR FALSIFICATION OF INFORMATION MAY JEOPARDISE EMPLOYMENT AND MAY RESULT IN A DELAYED PAYMENT.

I AM FULLY AWARE THAT THE COMPANY DOES NOT TOLERATE ANY FORM OF HARASSMENT.

I agree to abide by the company's policies and procedures as stated in the Company Policy Book.

I agree to a transfer in location if the need arises.

All casuals are employed on a daily basis.

Retail employees must wear the Company Uniform while performing work duties and uniform must be clean and ironed before starting work every day.

Retail employees must purchase their own Company Uniform.

**New employees will be subject to a minimum probationary period of three months.**

Signature of applicant: \_\_\_\_\_ Date: \_\_\_\_\_

**TO BE COMPLETED BY INTERVIEWER**

**Rate of Pay: As per Federal Meat Industry Award or Other - Please Specify** \_\_\_\_\_

Note: Please indicate position below

( ) Butcher/ ( ) Butcher ( ) Salesperson ( ) Other  
Manager ( ) Apprentice ( ) Cleaner  
\_\_\_\_\_ *Specify*

**Interviewer Check List**

- 1) Applicant has completed, read and understands this Application for Employment Form.
- 2) Applicant has been advised the company's employment conditions and policies.
- 3) Upon gaining employment, the applicant must complete, in full, the following:
  - i) Employment Declaration Form (Tax form)
  - ii) Occupational Superannuation Form.

**New employees have been advised:**

- i) That all wages will be paid into the Bank Account they elect each week (one account only).
- ii) To read Staff Induction Handbook before commencing employment
- iii) That he/she must complete a Uniform Issued Sheet
- iv) Of the minimum three month probationary period.

**Signature of Interviewer:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Wages Direct Deposit Details**

Please note that all wages are to be paid by direct deposit to the bank account you specify. Your wages will be deposited in to the bank account you have specified on the Wednesday/ Thursday immediately after the pay period just ended. Note. pay period is Monday to Sunday.

**PLEASE PRINT NUMBERS CLEARLY AS INCORRECT NUMBERS WILL DELAY PAYMENT**

**Bank Name** \_\_\_\_\_ **Branch Name** \_\_\_\_\_

**BSB No.** \_\_\_\_\_ **Account No.** \_\_\_\_\_  
(Must be SIX numbers) (Maximum NINE numbers)

Note: The numbers on your card identify your card and are not the same as your BSB & Account No's.

**Name(s) Accounts held in** \_\_\_\_\_