



Warrnambool Cheese and Butter

Employment Application

First Name: _____

Surname: _____

Address: _____

Town: _____ Postcode: _____

Home Phone: _____ Other Contact No: _____

Email Address: _____

What type of work are you interested in? _____

Are you available to work shifts? Yes No

Would you agree to undergo a medical and/or physiotherapy examination to assess your suitability to be able to carry out the requirements of a position? Yes No

Education and Qualification

Please list details of schools, colleges, universities attended and qualifications

Date of Attendance	Institution Attended	Qualification Achieved

Please list any other qualifications and/or licences held _____

Previous Employment History

Please list details of last three positions

Employer			
Job Title			
Employment from		To	
Reasons for leaving			
Name of Referee and Position Held			
Telephone Number			

Employer			
Job Title			
Employment from		To	
Reasons for leaving			
Name of Referee and Position Held			
Telephone Number			

Employer			
Job Title			
Employment from		To	
Reasons for leaving			
Name of Referee and Position Held			
Telephone Number			

Note: Referees will not be contacted without your permission.

I consent to the information contained in this application for employment and any other information pertaining to my employment, to be distributed within Warrnambool Cheese and Butter for the purpose of assessing my application for employment.

Applicant's signature _____ Date _____