



Cessnock City Council Job Application

Position Number:	
Position Name:	

Please note separate application forms are required for each position with Council must be received by the advertised closing date. Please ensure that your application is fully completed and addresses each of the essential and desirable selection criteria for the position. Please do not attach original documents as you will be asked to provide them at a later stage, where appropriate.

Part A - Personal Details

Name in Full Miss/Mr/Ms	
Street Address	
Suburb	
State	
Postcode	
Phone Number(Home)	
Phone Number (Day/Work)	
Email Address	
Drivers Licence (class & licence number)	
Do you hold Australian Permanent Residency	Yes/No
If No, provide details of Visa Status	

Envelopes to be marked and addressed to:

Telephone (02) 4993 4100

Fax (02) 4993 2500

Internet Address

Email

"Job Application - Private and Confidential"

General Manager

Cessnock City Council

PO Box 152

CESSNOCK 2325

[http: www.cessnock.nsw.gov.au](http://www.cessnock.nsw.gov.au)

hr@cessnock.nsw.gov.au

Part B - Essential Criteria

Please explain how you meet each of the **ESSENTIAL CRITERIA** for the position as stated in the job description. You may copy this page if you need additional space.

1.

Part C - Desirable Criteria

Please explain how you meet each of the **DESIRABLE CRITERIA** for the position as stated in the job specification. You may copy this page if you need additional space.

1.

Part E – Education (includes university qualifications, TAFE certificates, and Licences and professional development courses)

Please provide details of Tertiary and/or Secondary education you have completed or are currently undertaking. You may be asked to provide the original qualifications or course transcript at a later stage.

Year Commenced	Year Completed	Qualification	Institution

Licences eg drivers licence, WorkCover licences etc

Year Obtained	Expiry Date	Qualification	Institution

Please provide details of any other **training or professional development courses** you have completed that is relevant to this position.

Name of Course	Training Organisation	Year Completed

Part F – Professional Memberships

Please provide details of any professional memberships that you currently hold.

Details

Part G – References and Referees

Please provide details of at least three (3) referees who may be contacted to verify your work history. Your referees should be people who have supervised your work. In submitting this application you are providing authority for Council to contact your referees.

Name of Employer	Contact Person	Position held/ relationship to applicant	Telephone Number	email address
<i>Cessnock City Council</i>	<i>Joe Bloggs</i>	<i>Manager Recreation - Direct Supervisor</i>	<i>4993 4100</i>	<i>Joe.bloggs@cessnock.nsw.gov.au</i>

Please use this space to add any further comments you believe may be relevant to your application:

Part H - Applicant declaration

I understand and agree that:

If any information given by me in this application is found to be false, or if I am found to have deliberately misrepresented or omitted any relevant information, Council may refuse to employ me, or if I am already employed may terminate my employment immediately and without notice or payment in lieu of notice.

I am required to produce, before commencing duties, original qualifications or transcripts. Verification of these documents maybe undertaken by Council with my written consent.

It is Council policy that recruitment is based on individual merit. The information provided in this form will be used throughout the recruitment process for this particular position and may be disclosed to other employees or delegates involved in recruitment for this position.

Signature

Date