



EXPRESSION OF INTEREST – APPLICATION FORM

Expression of interest for position of: _____

Venues of interest: _____

Contact Details

Name: _____

Address: _____

State _____ Postcode _____

Phone: Home _____ Mobile _____
Work _____

1. Please provide details of last 3 positions held

1. Position: _____ Employer: _____
Start date: _____ End date: _____
Reason for leaving: _____
2. Position: _____ Employer: _____
Start date: _____ End date: _____
Reason for leaving: _____
3. Position: _____ Employer: _____
Start date: _____ End date: _____
Reason for leaving: _____

2. Education

Level of education attained:

Tertiary:

Degree/Diploma _____ Year Completed: _____

Secondary:

Level attained _____ Year Completed: _____

3. Additional Information

a. Have you been convicted by a court of any criminal offences? Note: You are not required to disclose an adult conviction more than 10 years old or a juvenile conviction more than 5 years old, provided you have not had a further conviction since and the maximum penalty for the original offence did not exceed 30 months.

b. Yes No

If yes, what conviction(s) do you have? _____

4. Ability to Perform the Job

Do you have a health problem (including any illnesses, injuries or disease) or a disability which could affect your ability to perform any of the duties of this position, or adversely affect the health & safety of other employees or patrons?

Yes No

If yes, please describe the health problem or disability

[Eg; Employee will need to lift cartons of beer or perform cellar work]

In particular, have you ever suffered from back injuries or any other injuries which could affect your ability to do physically demanding work?

Yes No

If yes, please describe your injury and whether it could be inflamed by doing physically demanding work

Do you hold a current driver's licence?

Yes No

Do you need special services or facilities to enable you to perform the job?

Yes No

If yes, what facilities or services do you need? _____

Do you know of any reason why, if appointed, you would be unable to attend regularly for work?

If so, please give details _____

5. Please nominate three referees (work related) that can be contacted:

Name: Phone Number: Relationship to you:

1. _____

2. _____

3. _____

By making this application of employment I acknowledge that Dixon Hospitality may check with any nominated previous employers regarding period of employment and performance. In addition, I consent for my details to be kept on file with Dixon Hospitality.

Signature: _____ **Date:** _____

Any additional information that you want us to consider in support of your application and which is relevant to it, please include with your application form. If you have a curriculum vitae and/or written references, please attach it/them to this form.

Please email completed EOI/Application form to: melany.lake@dixonhospitality.com.au