# APPLICATION COVERSHEET

**Please complete this form and include as part of your application.**

|  |
| --- |
| **DETAILS OF ADVERTISED VACANCY** |
| Position Number |  |
| Classification |  |
| Position Title |  |
| Where did you see the position advertised(double click on the box required and select Checked then ok) | [ ]  APS Jobs[ ]  Indigenous Jobs Australia[ ]  Australian Museums and Galleries Association Inc[ ]  Artshub[ ]  Other\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| If you were to be merit listed for this role, do you provide consent for your details to be shared with other agencies for similar roles? | [ ]  Yes [ ]  No [ ]  Please contact for approval |
| **PERSONAL PARTICULARS** |
| Title:  | [ ]  Dr [ ]  Mr. [ ]  Miss [ ]  Ms [ ]  Mrs |
| Surname: |  |
| Given Names: |  |
| Address for correspondence: |  |
| Telephone (work):  |  |
| Telephone (home):  |  |
| Telephone (mobile):  |  |
| E-mail address:  |  |
| Are you an Australian citizen? | [ ]  Yes [ ]  NoNote: Employees must hold Australian Citizenship. Permanent residency status does not meet this criterion. |

|  |
| --- |
| **CURRENT EMPLOYMENT DETAILS** |
| Are you currently employed within: Please Tick the appropriate box | [ ]  The Australian Public Service[ ]  A Commonwealth Statutory Authority [ ]  ACT Government[ ]  The Private Sector [ ]  Currently not employed |
| Current Employer |  |
| AGS Number (if applicable) |  |
| Classification (if applicable) | Actual Nominal  |
| Employment Type | [ ]  Ongoing / Permanent [ ]  Non-ongoing / Temporary / Casual |
| Do you hold a current Commonwealth Security Clearance? | [ ]  Yes: Level \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_[ ]  No  |
| Have you received a redundancy package from an APS Department/Agency or non APS Commonwealth agency in the last 12 months | [ ]  Yes [ ]  No [ ]  N/A |
| Has the period of exclusion (or ‘redundancy benefit period’) linked to the level of the redundancy benefit been applied and completed? | [ ]  Yes [ ]  No [ ]  N/A |
| **REFEREE DETAILS (Current Manager or Supervisor Preferred)** |
|  | **Referee One** | **Referee Two** |
| Name |  |  |
| Position |  |  |
| Contact Telephone |  |  |
| Email address |  |  |
| **WORKPLACE DIVERSITY DETAILS***The following questions are for statistical and reporting purposes only and will not be used in the assessment of your application for this position.* |
| Please indicate if you identify yourself as a member of the following groups. | Aboriginal / Torres Strait Islander [ ]  Yes [ ]  NoNon-English speaking background [ ]  Yes [ ]  NoDo you have a disability? [ ]  Yes [ ]  No |
| Do you have any need or assistance should you progress to interview?  | [ ]  No[ ]  Yes \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |