

Application form

Personal information

Name:

Home address:

City:

State:

Post code:

Phone number:

Email address:

Work information

What position are you applying for?

- Home Care Support Worker
- Home Care Cleaner
- Disability Support Worker
- Other (please specify)

How far are you willing to travel for a shift?

Availability:

- Monday
- Tuesday
- Wednesday
- Thursday
- Friday
- Saturday
- Sunday

Shift preference:

- Anytime
- Morning
- Afternoon
- Evenings

Employment type:

- Full time
- Part time
- Casual
- Any

Please select which qualifications or courses you have?

- Certificate III in Individual Support (or equivalent)
- Certificate IV in Individual Support (or equivalent)
- Diploma of Community Services
- Currently studying Certificate III in Individual Support (or equivalent)
- First Aid Certificate
- Manual Handling Certificate
- Medication Administration Certificate
- Other

Please select which documents below you have, or are able to obtain?

- Working with Vulnerable People registration
- COVID-19 vaccination including booster
- Australian Drivers Licence
- International Drivers Licence (with the ability to convert to Australian)
- Current Australian working rights
- National Police Check (working unsupervised with children)

Employment History

Employer 1

Company Name:

Address:

Position title:

Start Date:

End Date:

Reason for leaving:

Employer 2

Company Name:

Address:

Position title:

Start Date:

End Date:

Reason for leaving:

Please list any skills that you would like to mention.

Anglicare Tasmania is an **Equal Opportunity (EEO)** employer and welcomes applications from people from **Aboriginal and Torres Strait Islanders (ATSI)** and **Culturally and Linguistically Diverse (CALD)** backgrounds.

Anglicare Tasmania is committed to providing an inclusive and respectful work environment where all people are valued and have equal access to opportunities to reach their full potential.

Do you identify as Aboriginal or Torres Strait Islander?

- Aboriginal
- Torres Strait Islander
- Both
- No
- Rather not answer

Do you identify as someone living with a disability?

- Yes
- No
- Rather not answer