

that's my club

APPLICATION

FOR

EMPLOYMENT







The Young Services Club is an Equal Opportunity Employer. The information requested in this application form is required for us to enable a fair and equitable assessment process for all applicants.

MISSION STATEMENT

"To provide all staff and patrons with a safe, secure, clean and friendly environment, that can offer an enjoyable entertainment experience for people of all ages. This will be achieved by presenting the most professional, well trained, informed and customer focused staff, within any hospitality venue in the region"

Conditions of Employment

The following Conditions of Employment have been compiled by Management and Members of Staff, to help you to understand the duties and obligations expected of you at the Young Services Club and Young Federation Motor Inn.

All Staff must have the same objective:

The Success of the Young Services Club and Young Federation Motor Inn

To achieve this, we must work together as a **team**.

Getting along with team members is part of your job. As a team member, your coworkers are counting on you to come to work when you are scheduled, do your fair share of the duties and lend a hand whenever it is needed.

Working within the hospitality industry involves long and sometimes odd hours. More often than not, you will be required to work nights and weekends, as these are our busiest periods. All applicants should be available for any shift over the whole seven (7) days of the week, with emphasis on shifts from Thursday evening through to Sunday evening, a priority.

All new employees are considered on a probationary period of six (6) months. The purpose of this is to monitor and review your performance within the initial stages of your employment. During your probationary period, you are considered as being "Temporarily Employed". The Young Services Club reserves the right to annul the appointment of any new employee.





Date of Application:			
Position Applied For:			
Employment Status:	() Full Time	() Part Time	() Casual
Available to Commence:			
Are you available to worl	k: Week Days	s () Yes	() No
	Week Nigh	ts () Yes	() No
	Weekends	() Yes	() No
<u>Personal Details</u>			
Title: () Mr	() Mrs ()	Miss () Ms	
Surname:			
First Name:			
Address:			
Phone:		Mobile:	
Date of Birth:		Age:	
Email:			
Emergency Contact			
Surname:			
First Name:			
Address:			





Phone:	Mobile:
Relationship:	
Education	
Secondary Education:	
() Year 10 () Year 11 () Y	Year of Completion:
Technical/Professional:	
Qualification:	
Institution:	Year of Completion:
University:	
Qualification:	
Institution:	Year of Completion:
Other:	
Please indicate which of the following y	ou have completed:
() Responsible Service of Alcohol	() Responsible Conduct of Gambling
() Security	() First Aid
Please attach a copy of your Certificate	to this Application.

Employment History

Please complete information for your last three (3) employers or attach your resume:





Employer No 1:	
Position Held:	Period Employed:
Duties Performed:	
Reason for Leaving:	
Employer No 2:	
Position Held:	Period Employed:
Duties Performed:	
Reason for Leaving:	
Employer No 3:	
Position Held:	Period Employed:
Duties Performed:	
Reason for Leaving:	





Industry Experience

	Poker Machine			ars or month Restaurant	
Bar Steward	Attendant	Keno/T	Keno/TAB		
Club Doorperson	Supervisor/ Lockup	Cellar Operatio	ons	Weddings/ Functions	
Club Administration	Club/Motel Reception	Houseke Motel La		Motel Kitchen	
<u>Medical/Healtl</u> Injuries – I have	1 Record e or have had an inju	ry to the following	;:		
•		ry to the following () Wrist/s		Ankle/s	
Injuries – I have	e or have had an inju	() Wrist/s	()	Ankle/s Hip	
Injuries – I have () Back	e or have had an inju	() Wrist/s	()	,	
Injuries – I have () Back () Neck () Knee/s	e or have had an inju () Head () Shoulder/s	() Wrist/s() Hand/s() Finger/s	()	Hip	





Illness – I suffer	/have suffered from t	he following:	
() Blackouts	() Heart Disorder	r () Arthritis	() Skin Disorders
() Epilepsy	() Varicose Veins	() Hernia	() Breathing Disorder
() Migraines	() Asthma	() Allergies	() Other
Please provide de	tails of the illness, the	e treatment and/o	or medication:
What is the curre	nt status of the illness	s?:	
Smoking			
() I have never s	moked () I	currently smoke	
() I have smoked	l in the past, but have	e since given up.	
Hearing – What	is the status of your l	nearing?	
() Normal	() Hearing Impair	red Current	% of Impairment:
Please provide de	tails of hearing impai	rment:	
Are you aware of a employment? (o affect the full pe	erformance of your duties in
If yes, please give	details:		





Have you ever lodged a claim for Workers Compensation? () Yes () No If yes, please give details:
if yes, piease give details.
Would you be prepared to undergo a medical examination by the Club's Doctor, to determine your ability to carry out the full duties of the position you have applied for?
() Yes () No
<u>General</u>
Have you ever been discharged from any employer because your work or conduct was not satisfactory? () Yes () No If Yes, please give details:
Have you in the last five (5) years, been convicted of any offence other than minor traffic infringements? () Yes () No If Yes, please give details:
Do you have any objection to us seeking information, from your present/previous employers, regarding qualifications and character? () Yes () No If Yes, please give details:
Is there any additional information you wish to give:





Supporting Information
Why do you want to become part of the team at the Young Services Club/Young Federation Motor Inn?
What is your greatest achievement to date?
<u>Interests and Hobbies</u>
Referee Details
Name:
Company:
Position:
Phone:





Name:		
Company:		
Position:		
Phone:		
Declaration		
concerning my sperson from liab	Young Services Club to obtain information from any personitability for employment with the Club and hereby relebility for any damage, claims, costs and expenses, which on of such information.	ease any such
complete and co	e that the statements made by me in this application, are brrect. I understand that false and misleading answers to be regarded as misconduct and will be grounds for dismissions.	o any
Signature		

All Applications will be treated with confidentiality and fairness.

Thank you for your interest in the Young Services Club and Young Federation Motor Inn.

Best wishes.