

### SUPPORT WORKER

#### **APPLICATION FORM**

ALARA QLD Limited

8 Warwick Road Ipswich 4305 | p. 07 3817 0600 | e. alara@alaraqld.org.au

Surname:	First Name:	Other Name/s:
Present Address:		How long at address:
Telephone:	Mobile:	Alternative No:
Email:		
EDUCATIONAL BAC	CKGROUND	
Level	Qualification	Year Completed
Secondary		
Tertiary		
Business or Vocational		
Professional and / or pe	rsonal memberships:	
EMPLOYMENT HIS		( en en lan d)
Period of	for all unemployed time. Continue on another page i Employer	
Employment	(Name & Full Address of Organisation	n) Position Held / Title

# Application for Employment

ALARA QLD Limited

Question	No	Yes	Applicable Details	
Support Workers are required to assist people with personal care tasks. Are you willing to undertake this as part of your role?				
Do you speak any languages? Please list languages.				
Support Workers are required to obtain a First Aid Certificate and a CPR Certificate within three (3) months of the start of employment. It is the responsibility of successful applicants to meet these requirements.				
Do you have a current First Aid certificate? Please give the expiry date.				
Do you have a current CPR certificate? Please give the expiry date.				
All successful applicants are required by the D Criminal History Screening Suitability Check (N Positive Notice Blue Card Working with Childr	ellow C	ard). Sı		
Are you prepared to undergo a Criminal History Screening Blue / Yellow Card? This is completed by ALARA				
You will be required to present a current National Police Check Certificate prior to employment with ALARA as per Department of Health & Aged Care Police Certificate guidelines March 2017.				
Do you have a current National Police check?			Date of Check:	
Support Workers use their own motor vehicle to transport clients and are reimbursed for at the current rate per kilometre. The minimum requirement is that the vehicle must have third party property insurance. The following questions relate to ALARA's duty of care to clients to ensure their safety while being transported by Support Workers.				
Do you have a reliable registered car with third party property insurance that you can use to transport clients?				
Have you made any motor vehicle insurance claims in the last five (5) years?				
Have you had any special motor vehicle insurance conditions imposed on you in the past five (5) years?				
Have you had a driver's licence cancelled, suspended or restricted in the last five (5) years?				
Support Workers are required to comply with the relevant Public Health Orders or funding body requirements related to vaccination status and to provide evidence of your vaccination certificate.				
Are you fully vaccinated for COV-19? (2 doses of vaccination)				

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Question	No	Yes	Applicable details		
The work of a Support Worker involved bendi	ing, stre	tching, p	oushing, pulling and lifting. The following		
questions relate to the health & safety of employees. A copy of the Position Description for a Support					
Worker has been provided to you. Failure to disclose a pre-existing medical condition may make you					
ineligible for compensation in certain situatio	ns.				
Do you have any pre-existing medical					
conditions or injuries which would affect your ability to perform the duties outlined in					
the job description?					
Do you have any pre-existing medical					
conditions or injuries which could be					
aggravated by performing the duties					
outlined in the job description?					
Is there a preferred date you would be	_	_			
available to start if successful?					
ALARA works with a number of employment	onvices				
ALARA WORKS with a number of employments	services	•			
Are you attached to any agency as a Job					
Active client and please provide agency					
details?					
All new staff are required to have completed		S Morke	r Orientation Module prior to employment		
with ALARA.	the NDI	S WOIKE	er Orientation Module prior to employment		
	1	1			
Have you completed the NDIS Worker					
Orientation Module?					
A copy of your Certificate of Completion will be required at interview.					
To be eligible for employment, you must be a	n Austra	alian Citi	izen. Permanent Resident or hold a valid		
work Visa. If you are offered a position with					
Australian Birth Certificate; Australian Passpo	-				
Residence; status of valid Visa with permissio	n to wo	rk.			
	_	_			
Are you entitled to work in Australia?					
AVAILABILITY TO WORK: (Please list be	low the	time you	ı are available for shifts)		
Monday:					
Tuesday:					
Wednesday:					
Thursday:					
Friday:					
Saturday:					
Sunday:					
Comments:					

Please list any sport and recreation interests you have:
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What are your reasons for applying for this particular job:

How did you find out about ALARA?

- □ Friend
- □ Employment Agency
- □ Word of mouth
- □ Facebook
- □ Website
- □ Advertisement
- □ Other: \_\_\_\_\_

If you were a person with a disability, how would you expect to be treated by a worker?

REFER	EE CO	NTACT	DETAILS

Can these referees be contacted prior to interview?	🗖 Yes	🗆 No	
(include two (2) former employers and one (1) character reference.	Please note re	ferees are not to include	relatives

Name and Address	Position	Telephone	How long known?

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ALARA QLD Limited

I give my Consent and understand my information will be destroyed after twelve (12) months. I <b>do NOT</b> Consent, but understand my information will be destroyed after one (1) month.	
ALARA QLD Limited follows the Australian Privacy Principles contained in the <i>Privacy Act 1988</i> (Cth) (the 'Pri Act'). in handling personal information from clients/carers, business partners, donors, members of the publ ALARA QLD Limited People (including members, volunteers, employees, delegates, candidates for volunteer and prospective employees). As you have provided personal information ALARA Qld Limited requires your c hold your information for up to 12 months. Please tick Yes or No to your consent below, if you tick NO your information and application will be destroyed after 1 month. If you give consent your information will be ke to 12 months at which point will be destroyed if you are not successful in your employment with ALARA Qld	lic and r work consent to ept for up
I verify that the above information which I have provided in this application is true and correct and acknowledge that, if my application is successful, any false or misleading statement in this application could constitute grounds for subsequent dismissal.	

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Signature of Applicant:	Date of Application:
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OFFICE USE ONLY:				
Application received on: / / By:				
NDIS compliance & enforcements register checked: / / By:				
Aged Care Banning Orders checked: / /	Ву:			
Application shortlisted for interview:	🗆 No			
Interview conducted on: / /				