

Application Form

This an an application for the position of _____ with the AbbeyGlaze Team

Applicant Information

Full Name: _____ Date: _____
Last First M.I.

Address: _____
Street Address

_____ *Suburb State PostCode*

Phone: _____ Email _____

Are you a permanent Resident? YES NO If no, are you allowed to work in Australia? YES NO
Do you have a driver's license? YES NO Is this a manual license? YES NO

Education

High School: _____

From: _____ To: _____ What grade did you complete? _____

TAFE or Uni _____

From: _____ To: _____ Did you graduate? YES NO Qualifctn: _____

Other: _____

From: _____ To: _____ Did you graduate? YES NO Degree: _____

References

Please list three professional references.

Full Name: _____ Relationship: _____

Company: _____ Phone: _____

Address: _____

Full Name: _____ Relationship: _____

Company: _____ Phone: _____

Address: _____

Full Name: _____ Relationship: _____
Company: _____ Phone: _____
Address: _____

Previous Employment

Company: _____ Phone: _____
Address: _____ Supervisor: _____

Job Title: _____ Starting Salary:\$ _____ Ending Salary:\$ _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference? YES NO

Company: _____ Phone: _____
Address: _____ Supervisor: _____

Job Title: _____ Starting Salary:\$ _____ Ending Salary:\$ _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference? YES NO

Please attach a short paragraph answering each of the following questions.

What is your dream job?

What is the most impressive glazing job you have worked on, and why?

What hobbies and interests do you have outside of work? Why do you enjoy it?
