

DEPARTMENT OF INDIGENOUS AFFAIRS

EXPRESSION OF INTEREST IN FIXED TERM CONTRACT OR SECONDMENT OPPORTUNITY

IMPORTANT NOTES:

1. Applications must be lodged before the closing time and date as specified in the advertisement. NO LATE APPLICATIONS CAN BE ACCEPTED.
2. Each application must consist of the following: (a) an application form (b) your Curriculum Vitae (CV); and (c) a statement of no more than three (3) A4 pages addressing the job work-related requirements. If applying for more than one vacancy, please submit separate applications.
3. Consult this Department's guide entitled "Writing a Winning Job Application" to ensure preparation of a valid application.
4. The Department of Indigenous Affairs is an equal opportunity employer and has a smoke-free workplace.
5. If you are recommended for appointment to a position exceeding six (6) months in duration, you will be required to provide a National Police Certificate (NPC). Please see the section on criminal record screening in this application form.

VACANCY DETAILS	Position Title		
	Position Number	Position Location	Classification Level
PERSONAL DETAILS	<input type="checkbox"/> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Ms <input type="checkbox"/> Miss <input type="checkbox"/> Dr		Surname (Family Name)
	Other Names		Preferred Name
	Postal Address for Notification		
	Email Address		Postcode
	Contact Telephone Number Private Business Mobile Phone		Are you an Australian Citizen or Permanent Resident? <input type="checkbox"/> Yes <input type="checkbox"/> No Permanent Residency is a pre-requisite for appointment to permanent staff.
CURRENT EMPLOYMENT	Position Title		
	Employer/Department		
	Are you a State Government Employee? <input type="checkbox"/> Yes <input type="checkbox"/> No		If yes, please indicate employment status: <input type="checkbox"/> Permanent <input type="checkbox"/> Contract
	If yes, please indicate your Substantive Position title:		Position Level
	If you are currently acting, please also indicate your acting Position Title:		Position Level Acting for how long?

EMPLOYMENT REFEREES	Referees must be employment related, not character or personal referees. It is preferred that one be your current Supervisor or Manager.				
	1	<input type="checkbox"/> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Ms <input type="checkbox"/> Miss <input type="checkbox"/> Dr		Surname (Family Name)	Other Names
		Position Title		Organisation	Contact Telephone Number (daytime)
		Working Relationship (ie Supervisor/Director)			Mobile Phone
	2	<input type="checkbox"/> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Ms <input type="checkbox"/> Miss <input type="checkbox"/> Dr		Surname (Family Name)	Other Names
		Position Title		Organisation	Contact Telephone Number (daytime)
		Working Relationship (ie Supervisor/Director)			Mobile Phone

PLEASE COMPLETE DETAILS OVER PAGE

