A close-up of a logo

Description automatically generated

Glenworth Valley Services P/L ABN: 42 658 080 810 T/A Glenworth Valley Wilderness Adventures  
**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**OUTDOOR ADVENTURE EXPERIENCES | CAMPING & ACCOMMODATION | AGISTMENT | EVENTS**

69 Cooks Rd, Glenworth Valley NSW 2250 **p**: 02 4375 1222 **e**: [adventures@glenworth.com.au](mailto:adventures@glenworth.com.au) [www.glenworth.com.au](http://www.glenworth.com.au)

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APPLICATION FOR EMPLOYMENT

**FINANCIAL ACCOUNTANT**

|  |  |  |  |
| --- | --- | --- | --- |
| **Name:** |  | | |
| **Address:** |  | | | |
| **Mobile:** |  | **DOB (for working with children’s check verification purposes):** |  | |
| **Email:** |  | | | |

**Have you ever been to Glenworth Valley before?**  Yes  No

**Do you smoke?**  Yes  No

**Have you smoked in the last 6 months?**   Yes  No

**Whiat hours are you interested in working?**  Full Time, 40 hours per week Part time, 32 hours per week  Either

**If you currently live outside of the Central Coast Region are you planning on moving in the near future?**  Yes  No

**Please add any further relevant comments.**

|  |
| --- |
| *Enter text* |

**Please provide a brief outline of your general financial accounting experience and any notable achievements?**

|  |
| --- |
| *Enter text* |

**Out of 10, with 1 being least and 10 being most, how competent, and experienced are you with the following:**

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | **1** | **2** | **3** | **4** | **5** | **6** | **7** | **8** | **9** | **10** |
| MYOB |  |  |  |  |  |  |  |  |  |  |
| Administering accounts payable & receivable |  |  |  |  |  |  |  |  |  |  |
| Financial management, budgeting, and reporting |  |  |  |  |  |  |  |  |  |  |
| Developing business feasibility proposals |  |  |  |  |  |  |  |  |  |  |
| Preparation of statutory reporting obligations ie annual tax, BAS, PAYG and workers compensation returns |  |  |  |  |  |  |  |  |  |  |
| Creating budgets, cashflow forecasts |  |  |  |  |  |  |  |  |  |  |
| Developing P&L statements |  |  |  |  |  |  |  |  |  |  |
| Payroll |  |  |  |  |  |  |  |  |  |  |
| Point of sale software systems |  |  |  |  |  |  |  |  |  |  |
| Creating general ledgers and balance sheets |  |  |  |  |  |  |  |  |  |  |
| Knowledge of FWA and interpreting industrial relation awards |  |  |  |  |  |  |  |  |  |  |
| Overseeing accounting software systems |  |  |  |  |  |  |  |  |  |  |
| Microsoft Office suite (Particularly Excel) |  |  |  |  |  |  |  |  |  |  |

|  |
| --- |
| *Enter text* |

**Please list all qualifications and training that you have undertaken such as Educational and First Aid etc?**

**Short listed candidates may be asked to participate in a volunteer trial day.**

**Are you prepared to undertake a trial day if you are short listed?**  Yes  No

**Employment at GVWA is offered to employees on a six (6) month trial basis which may be extended for a further period if required. Are you prepared to undertake a trial period of employment?**   Yes  No

**Employees of GVWA are required by law to have a Working With Children (WWC) clearance. Are you prepared to obtain your own WWC clearance?**   Yes  No

**If you already have WWC clearance, please state the number and expiry**

|  |
| --- |
| *Enter text* |

**Do you have any injuries or disabilities that may affect your ability to carry out your position description?**  Yes  No

**If yes, please describe**

|  |
| --- |
| *Enter text* |

**Please provide details of any workers compensation claims made (or pending) by you or on your behalf? Please be advised that extensive employment background checks are carried out during the final stages of the recruitment process for all short listed candidates, so please answer accurately.**

|  |
| --- |
| *Enter text* |

**Please provide details of the last three positions you have held.**

**Please note we will never contact your current employee without approval from you first.**

**Please ensure to provide an up to date copy of your resume along side your application.**

**Position 1 (Most Recent)**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Company** |  | | | |
| **Position held** |  | | | |
| **Employment dates** | **From** | Click here to enter a date. | **To** | Click here to enter a date. |
| **Name of supervisor** |  | | | |
| **Contact phone number** |  | | | |
| **Description of duties** |  | | | |
| **Reason for leaving** |  | | | |

**Position 2**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Company** |  | | | |
| **Position held** |  | | | |
| **Employment dates** | **From** | Click here to enter a date. | **To** | Click here to enter a date. |
| **Name of supervisor** |  | | | |
| **Contact phone number** |  | | | |
| **Description of duties** |  | | | |
| **Reason for leaving** |  | | | |

**Position 3**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Company** |  | | | |
| **Position held** |  | | | |
| **Employment dates** | **From** | Click here to enter a date. | **To** | Click here to enter a date. |
| **Name of supervisor** |  | | | |
| **Contact phone number** |  | | | |
| **Description of duties** |  | | | |
| **Reason for leaving** |  | | | |

**What aspects of this position and working at Glenworth Valley appeals to you the most and why?**

|  |
| --- |
| *Enter text* |

**What do you regard as your best skills and past experiences that make you the best candidate for this position?**

|  |
| --- |
| *Enter text* |

**Please provide as much detail as possible about your goals and ambitions for the next three to five years?**

|  |
| --- |
| *Enter text* |

**Comments: Is there anything else that you would like to add or that you are curious about in relation to the role? Please include your resume.**

|  |
| --- |
| *Enter text* |

**Signature:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Date:** Click here to enter a date.