

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**: [employment@glenworth.com.au](mailto:employment@glenworth.com.au) [www.glenworth.com.au](http://www.glenworth.com.au)

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

APPLICATION FOR EMPLOYMENT

**CARPENTER/ FARMHAND**

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

Have you been to Glenworth Valley before? ……………………………………………………………………………. Yes  No

For general background purposes, please indicate the total number of times you have participated in the following activities in your life, if any?

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Abseiling |  | Horse Riding |  | Kayaking |  | Quad Biking |  | Camping |  |

Do you smoke?.......................................................…………………………………………………………………. Yes  No

Have you smoked in the last 6 months? …………………………………………………. Yes  No

If you currently live outside of the Central Coast Region are you planning on moving in the near future? Yes

Please add any further relevant comments.

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

**Please provide a brief outline of your carpentry experience.**

|  |
| --- |
|  |

**Please provide a brief outline of your farm, agriculture or handyman experience.**

|  |
| --- |
|  |

**Please list all training, qualifications, licences, and tickets that you have (such as educational, first aid, chemical handling, firearm, tractors etc)?**

|  |
| --- |
|  |

**Please provide an honest and accurate self-assessment of your competency in the following areas. Please don’t be deterred if you have no or very little competency in a number of areas, this is normal. Out of 10, with 1 being the lowest and 10 being the highest, how competent and experienced are you with the following:**

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | **1** | **2** | **3** | **4** | **5** | **6** | **7** | **8** | **9** | **10** |
| Overall carpentry skills |  |  |  |  |  |  |  |  |  |  |
| Operation of power tools |  |  |  |  |  |  |  |  |  |  |
| Construction and installations |  |  |  |  |  |  |  |  |  |  |
| Renovation and improvements |  |  |  |  |  |  |  |  |  |  |
| General Repairs and maintenance |  |  |  |  |  |  |  |  |  |  |
| Timber treatment and maintenance |  |  |  |  |  |  |  |  |  |  |
| Fencing |  |  |  |  |  |  |  |  |  |  |
| Formwork and concreting |  |  |  |  |  |  |  |  |  |  |
| General farm work |  |  |  |  |  |  |  |  |  |  |
| Rural plumbing or irrigation repairs |  |  |  |  |  |  |  |  |  |  |
| Chainsaws operation |  |  |  |  |  |  |  |  |  |  |
| Operating tractors and trucks |  |  |  |  |  |  |  |  |  |  |
| Operating bobcat, backhoe or excavators |  |  |  |  |  |  |  |  |  |  |
| Motor bike and quad bike operations |  |  |  |  |  |  |  |  |  |  |
| Livestock handling |  |  |  |  |  |  |  |  |  |  |

**Short listed candidates may be asked to participate in a volunteer trial day to demonstrate their competency and experience a typical day (in a voluntary capacity) followed by a formal interview at the conclusion of the day. Likewise a trial day provides applicants with an opportunity to gain a hands on insight into the role and the people you will be working with. If you are appointed to the role we will pay you for your trial day however if you are unsuccessful your trial day will be regarded as volunteer day.**

**Are you prepared to demonstrate your competency via a trial day?................................** 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 WWC and expiry here* |

**All applicants are required to include a copy of their proof of identity such as drivers licence etc.**

**Have you attached a copy of your photo ID to this application?** Yes  No

**Do you have any injuries or disabilities that may affect your ability to carry out the  
duties stated in the job description?** Yes  No

**If yes, please describe**

|  |
| --- |
|  |

**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.**

|  |
| --- |
|  |

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

**Position 1 (Most Recent)**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Company** |  | | | |
| **Position held** |  | | | |
| **Employment dates** | **From** |  | **To** |  |
| **Name of supervisor** |  | | | |
| **Contact phone number** |  | | | |
| **Description of duties** |  | | | |
| **Reason for leaving** |  | | | |

**Position 2**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Company** |  | | | |
| **Position held** |  | | | |
| **Employment dates** | **From** |  | **To** |  |
| **Name of supervisor** |  | | | |
| **Contact phone number** |  | | | |
| **Description of duties** |  | | | |
| **Reason for leaving** |  | | | |

**Position 3**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Company** |  | | | |
| **Position held** |  | | | |
| **Employment dates** | **From** |  | **To** |  |
| **Name of supervisor** |  | | | |
| **Contact phone number** |  | | | |
| **Description of duties** |  | | | |
| **Reason for leaving** |  | | | |

**What do you believe are some of the main challenges faced in this position and how would you overcome these?**

|  |
| --- |
|  |

**What aspects of this position appeals the most to you and why?**

|  |
| --- |
|  |

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

|  |
| --- |
|  |

**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.**

|  |
| --- |
|  |

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

**Date:**