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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

**FUNCTION AND EVENTS CHEF DE PARTIE**

|  |  |  |  |
| --- | --- | --- | --- |
| **Name:** |  | | |
| **Address:** |  | | | |
| **Mobile:** |  | **D.O.B (for working with children check verification)** |  | |
| **Email:** |  | | | |

Have you been to Glenworth Valley before? Yes  No

Do you smoke? Yes  No

Have you smoked in the last 6 months? Yes  No

Please indicate which option below suits you best ie how many hours would you prefer to work each week?

|  |  |  |
| --- | --- | --- |
| Part time – 3 days (24 hours) per week | Part time – 4 days (32 hours) per week | Full time – 5 days (38 hours) per week |

Please indicate your general available days of employment

|  |  |  |
| --- | --- | --- |
| Monday | Tuesday | Wednesday |
| Thursday | Friday | Saturday |
| Sunday |  |  |

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 |  |

**Please provide a brief outline of your skills and experience working as a Chef De Partie?**

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

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | **1** | **2** | **3** | **4** | **5** | **6** | **7** | **8** | **9** | **10** |
| Ability to work efficiently under pressure, manage time effectively |  |  |  |  |  |  |  |  |  |  |
| Supervisory skills, including coaching and team leading experience |  |  |  |  |  |  |  |  |  |  |
| Working in a functions, Events or catering kitchen |  |  |  |  |  |  |  |  |  |  |
| Ability to plan and manage food service for functions and events |  |  |  |  |  |  |  |  |  |  |
| Achieving high quality food production in a fast-paced environment |  |  |  |  |  |  |  |  |  |  |
| Creating innovative, high-quality menus |  |  |  |  |  |  |  |  |  |  |
| Ability to work through and resolve unexpected changes and challenges |  |  |  |  |  |  |  |  |  |  |
| Safe food handling and allergy management procedures and requirements |  |  |  |  |  |  |  |  |  |  |
| Knowledge of WHS and OHS legislation |  |  |  |  |  |  |  |  |  |  |
| Microsoft Office suite of programs |  |  |  |  |  |  |  |  |  |  |

**Please list all qualifications and training that you have undertaken (such as Educational and food handling)?**

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|  |

**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 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**

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**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**

|  |
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|  |

**Please provide details of any workers compensation claims made (or pending) by you or on your behalf, including any disputes or grievances you have pursued against and previous employers.**

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

**Please note we will not contact any past employees without prior consultation with you first**

**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 aspects of our Chef De Partie position appeal to you the most and why?**

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|  |

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

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|  |

**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.**

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|  |