



## Registration Form for Casual Work

---

### 1. PERSONAL DETAILS

Registration Date: \_\_\_\_\_ Full name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_ Post Code: \_\_\_\_\_

Contact numbers: (Home) \_\_\_\_\_ (Mobile) \_\_\_\_\_ (Other) \_\_\_\_\_

Email: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Gender: M  F

Australian Resident: Yes  No  If no, do you have a valid Australian work visa? Yes  No

### 2. TRANSPORT & AVAILABILITY (please tick)

Do you have current licenses for any of the following?

- Car
- Heavy Vehicle (please specify classes/s) .....
- Motorcycle (please specify classes/s) .....
- Bus

Do you have your own transport?

- Yes
- No
- Sometimes

What days you are available for work? (must be at least 1 full day, no weekend work available)

- Mon     Tues     Wed     Thurs     Fri

### 3. WORKING ATTIRE Do you have the following items (please tick):

- a) Steel capped work boots Yes No    b) Work gloves Yes No    c) Wide brimmed hat Yes No  
d) Clothing suitable for outdoor work ie long sleeved shirt and pants? Yes No

To complete full registration for Ecojobs you will need to obtain the above items prior to being allocated any work. Ecojobs work shirts are available for purchase, however they are not compulsory.

### 4. TEAM LEADING/SUPERVISING

Do you have any leadership experience? (If so, please provide brief details):

.....  
.....

**5. QUALIFICATIONS/TRAINING/CERTIFICATES/LICENCES**

Do you hold a current licence/certificate for any of the following (*please tick*):

- |                                                                   |                                                                 |
|-------------------------------------------------------------------|-----------------------------------------------------------------|
| <input type="checkbox"/> First Aid Expiry Date: .....             | <input type="checkbox"/> Power Tool Use (whippersnippers etc..) |
| <input type="checkbox"/> "Blue Card" Safety Awareness Certificate | <input type="checkbox"/> Pesticide/Herbicide Licence            |
| <input type="checkbox"/> Occupational Health & Safety Training    | <input type="checkbox"/> Chainsaw Operators Licence             |
| <input type="checkbox"/> Police Clearance                         | <input type="checkbox"/> Other.....                             |
| <input type="checkbox"/> Working With Children Check              |                                                                 |

**What courses or qualification are you CURRENTLY studying (*if applicable*)?**

1. ....
2. ....

**Please provide details of all other relevant qualifications and courses COMPLETED:**

1. ....
2. ....
3. ....

**6. PRACTICAL WORK EXPERIENCE**

Do you have any practical experience in the following areas?

***(Please tick and advise where experience was gained)***

- |                                                       |       |
|-------------------------------------------------------|-------|
| <input type="checkbox"/> Tree planting                | ..... |
| <input type="checkbox"/> Manual weed control          | ..... |
| <input type="checkbox"/> Chemical weed control        | ..... |
| <input type="checkbox"/> Weed mapping                 | ..... |
| <input type="checkbox"/> Bush regeneration            | ..... |
| <input type="checkbox"/> Seed collection              | ..... |
| <input type="checkbox"/> Nursery/Horticulture         | ..... |
| <input type="checkbox"/> Wetland management           | ..... |
| <input type="checkbox"/> Environmental auditing       | ..... |
| <input type="checkbox"/> Preparing management plans   | ..... |
| <input type="checkbox"/> Environmental surveys        | ..... |
| <input type="checkbox"/> Flora surveys                | ..... |
| <input type="checkbox"/> Environmental project mgmt   | ..... |
| <input type="checkbox"/> Organic farming              | ..... |
| <input type="checkbox"/> Teaching/lecturing           | ..... |
| <input type="checkbox"/> Report writing               | ..... |
| <input type="checkbox"/> Office/Administration skills | ..... |
| <input type="checkbox"/> Other                        | ..... |

**7. REFEREE'S Please list the details of TWO recent employment referees:**

Organisation	Organisation
Name & Title	Name & Title
Ph. No.	Ph. No.