

Privacy Statement

SeaLink SEQ is collecting personal information through an application process for the selection and recruitment of staff. SeaLink SEQ, its advisors and any persons engaged by them to assist in the selection and recruitment may use and disclose your information for selection and recruitment purposes. This may include contacting any referee nominated by you. Please note that in the event that your application with SeaLink SEQ is successful, the personal information that SeaLink SEQ holds about you, which relates to your selection, recruitment and employment by SeaLink SEQ, will become an employee record under the Privacy Act (1988). This means that SeaLink SEQ will generally be exempt from the requirements of the Privacy Act in respect of that information. Other statutory obligations may apply.

PERSONAL AND CONTACT INFORMATION

Surname: Given name(s):

Date of birth: Address:

Suburb: Post code:

Mobile no: Home/work no:

Email address:

POSITION

Title of position applied for: Full time Part time Casual

LEGAL AND ORGANISATIONAL PROFILE

Place of birth: Are you a permanent resident of Australia? Yes No

Please provide a copy of your passport details. If you are not a permanent resident of Australia, please attached your Visa class/details.

Do you have any unspent criminal convictions? Yes No

If yes, please provide details:

Have you had any marine suspensions? Yes No

If yes, please provide details:

Have you had any marine convictions involving alcohol or drugs?	Yes	No
If yes, please provide details:		
Have you had any dangerous driving convictions?	Yes	No
If yes, please provide details:		
MEDICAL		
Have you ever had, or do you have, a serious medical condition such as a heart attack, stroke, back injury etc, which is likely to reasonably affect your work?	Yes	No
If yes, please provide details:		
Do you have a disability or impairment likely to affect your work, or likely to be aggravated by your work?	Yes	No
If yes, please provide details:		
Do you have any known allergies?	Yes	No
If yes, please provide details:		
Have you had, or do you have, an injury that may impair your ability to work in the role you have applied for?	Yes	No
If yes, please provide details:		
If yes, what treatment / medication did you receive?		
Do you consent to undergo pre-employment and ongoing medicals, if appropriate?	Yes	No

REFERENCE INFORMATION		
Do you have any objections to SeaLink SEQ obtaining information about your employment history from current or previous employers?		Yes No
If yes, please specify why:		
Reference 1	Business / employer's name:	
	Referee name:	
	Position:	Contact number:
Reference 2	Business / employer's name:	
	Referee name:	
	Position:	Contact number:

DECLARATION	
I declare the statements in this application are true in all respects.	
I acknowledge that I may be required to furnish proof of any statement made in my application, and that any statement, which is found to be false or deliberately misleading may cause my application to be invalid, or I may be liable for dismissal if employed.	
Signature:	Date: