

# Work Experience Application

*Please complete each section and attach any supporting documents*



## SECTION 1 – Personal and Contact Details

Surname:	Other Names:	Preferred Name:
Address:		Postcode:
Phone:		Other:
Email:		

## SECTION 2 – Learning Institution (provide details of learning institution below)

<input type="checkbox"/> University	<input type="checkbox"/> High School	<input type="checkbox"/> Other	N/A
Learning Institution Name:			
Learning Institution Contact Details:			
Name:		Phone:	
Position:		Email:	

## SECTION 3 – Reason for Requesting Work Experience at the Shire

<input type="checkbox"/> Component of VET course or University curriculum
<input type="checkbox"/> Seeking employment within Local Government
<input type="checkbox"/> Location
<input type="checkbox"/> Other (please comment below)

#### SECTION 4 – Work Experience Area/s of Interest

- |   |   |
|---|---|
| <input type="checkbox"/> Administration (Corporate Services)    | <input type="checkbox"/> Libraries                      |
| <input type="checkbox"/> Community Engagement                   | <input type="checkbox"/> Information Technology         |
| <input type="checkbox"/> Community Safety (Rangers/Fire Safety) | <input type="checkbox"/> Family and Children's Services |
| <input type="checkbox"/> Environment/Parks and Gardens          | <input type="checkbox"/> Health Services                |
| Building Services   | Planning Services                                       |
| Communications  | Civil Design (Engineering)                              |
| Civil Construction and Maintenance                              | Recreation and Tourism Services                         |

If your area of interest involves working with minors you will be requested to provide a Working With Children Check (attach copy if applicable).

Are you studying for related qualifications now?  Yes  No

If YES, provide details:

#### SECTION 5 – Period of Work Experience

Start Date:

End Date:

Any other considerations as prescribed by your Learning Institution curriculum (eg: number of hours per day, specific day/s, etc.):

#### SECTION 6 – Insurance Policy Cover

To ensure your safety at the Shire of Mundaring you will need to have Public Liability Insurance.

I understand it is my or my Learning Institution's responsibility to ensure appropriate insurance cover

Signature:

Date:

#### SECTION 7 - Checks

- Insurance policy cover
- Working with Children Check (if applicable)
- I have the right to live and work in Australia
- Resume attached (if applicable)
- I am 16 years old or older

#### ACCESSIBILITY AND REASONABLE ADJUSTMENTS

If you have any access needs that may require reasonable adjustments to allow you to complete your form, please contact People and Culture on 9290 6695 or email

[humanresources@mundaring.wa.gov.au](mailto:humanresources@mundaring.wa.gov.au).

If you are an Aboriginal person or a person with a disability and would like assistance with your work experience application, contact the Jobs and Skills Centre on 13 64 64 or email

[perthjc@nmtafe.wa.edu.au](mailto:perthjc@nmtafe.wa.edu.au).

Thank you for your interest in work experience at the Shire of Mundaring. Please note your application for work experience is subject to the Shire having the capacity to accommodate a placement for the period specified on this form.