



## EMPLOYMENT APPLICATION FORM

### About Us

We are a company who moved from Oakbank in the late 80's to Mount Barker, specialising in the manufacture of fresh cut products. Mid 1994 saw us constructing a new processing facility which would lead us into larger volumes of trade both locally and abroad, and to have the capacity to confidently pursue and capture export markets in the future. Our goal is to develop our company and employees to secure a position in the local community and indeed abroad in the long term.

### Work Environment

Our company processes fresh fruit and vegetables in areas that are as cold as 2 degrees Celsius. Our processing is fast paced, and requires our employees to be in good physical condition, and to be able to endure the cool wet environment that is required to safely prepare cut fresh fruit and vegetables in the ways that we do. Duties may include the use of knives for produce preparation, lifting of items 10-15kg in weight, the rolling around of pallets or bins of produce and standing for periods of up to 2 ¾ hours at a processing line amongst many other duties.

### Safety Commitment

We are a company committed to continuously improve our safety record in the work place. For your application to be considered, we require that you commit yourself to complying with all company policy regarding safety, and to agree to a drug test, should any of our supervisory staff suspect that there is evidence of endangering yourself or other employees due to the possible influence of any drug.

### Quality Commitment

At Barker Boy Processing we are committed to the ethos of producing a profitable quality product via the use of quality materials by a quality committed work force. As such the management look for people who personally possess a quality ethic and are prepared to utilise this to the profitable benefit of not only the employee, but also to Barker Boy Processing.

I HAVE CAREFULLY READ AND ACKNOWLEDGE AND AGREE TO THE ABOVE.

SIGNED.....DATE.....

NAME.....

# EMPLOYMENT APPLICATION FORM

*This application form must be completed as accurately as possible. It is essential for the processing of your application for employment that **ALL** questions are answered.*

*The following questions are designed as an overview for all positions of work carried out at Barker Boy Processing. As such, different positions will require different combinations of skills required. This form therefore is not position specific.*

*Each applicant must accept that no guarantee of employment is given by the completion of this form.*

POSITION APPLIED FOR: \_\_\_\_\_

ARE YOU SEEKING: FULL TIME / PART- TIME / CASUAL EMPLOYMENT – (Please circle)

SURNAME: \_\_\_\_\_ FIRST NAME(S): \_\_\_\_\_

ADDRESS (RESIDENTIAL): \_\_\_\_\_

\_\_\_\_\_ POST CODE: \_\_\_\_\_

POSTAL ADDRESS (IF DIFFERENT FROM ABOVE): \_\_\_\_\_

\_\_\_\_\_ POST CODE: \_\_\_\_\_

TELEPHONE: \_\_\_\_\_ AFTER HOURS: \_\_\_\_\_

ARE YOU LEGALLY ENTITLED TO WORK IN AUSTRALIA? (Please circle) YES NO

DO YOU HAVE ANY PHYSICAL DISABILITY, MEDICAL CONDITION OR ANY OTHER CONDITION WHICH MAY AFFECT YOUR ABILITY TO DO THE JOB? IF YES, GIVE DETAILS:

\_\_\_\_\_  
\_\_\_\_\_

ARE THERE ANY OTHER REASONS WHICH MAY AFFECT YOUR ABILITY TO PERFORM THE REQUIRED DUTIES? IF YES, GIVE DETAILS:

\_\_\_\_\_  
\_\_\_\_\_

WILL YOU AGREE TO UNDERGO A MEDICAL EXAMINATION IF REQUESTED?(Please circle) YES NO

## EDUCATION

| QUALIFICATION | NAME OF ESTABLISHMENT | LEVEL ACHIEVED | DATE COMPLETED |
|---------------|-----------------------|----------------|----------------|
|               |                       |                |                |
|               |                       |                |                |
|               |                       |                |                |
|               |                       |                |                |
|               |                       |                |                |

OTHER RELEVANT QUALIFICATIONS/ABILITIES EG DRIVERS LICENCES, LANGUAGES, COMPUTER SKILLS, FIRST AID CERTIFICATE ETC:

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## EMPLOYMENT HISTORY

HAVE YOU PREVIOUSLY WORKED FOR BARKER BOY PROCESSING? (Please circle) YES                  NO

PLEASE LIST YOUR LAST 3 EMPLOYERS

| DATE | COMPANY | LOCATION | YOUR POSITION |
|------|---------|----------|---------------|
|      |         |          |               |
|      |         |          |               |
|      |         |          |               |

PLEASE PROVIDE NAME AND ADDRESS OF EITHER 3 CONTACT PERSONS AT YOUR PREVIOUS COMPANY OR THREE REFEREES FROM WHOM CONFIDENTIAL REPORTS MAY BE OBTAINED:

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

|                           |   |     |    |
|---------------------------|---|-----|----|
| ARE YOU PREPARED TO WORK: | DAY SHIFT<br>(6.00 am – 6.00 pm)              | YES | NO |
|                           | AFTERNOON SHIFT<br>(6.00 pm – 12.00 midnight) | YES | NO |
|                           | NIGHT SHIFT<br>(12.00 midnight – dawn)        | YES | NO |

IF REQUESTED WOULD YOU BE ABLE TO WORK OUTSIDE OF NORMAL HOURS, GIVEN APPROPRIATE ADVANCE NOTICE? (Please circle)

YES OCCASIONALLY RARELY NO

IF REQUIRED WOULD YOU BE ABLE TO UNDERTAKE COUNTRY OR INTERSTATE TRAVEL GIVEN SUFFICIENT NOTICE? (Please circle)

YES OCCASIONALLY RARELY NO

HAVE YOU DONE LINE WORK BEFORE? (Please circle) YES NO

IF YES, WHICH COMPANY: \_\_\_\_\_

GIVE BRIEF DETAILS: \_\_\_\_\_

HOW LONG FOR: \_\_\_\_\_

HAVE YOU HELD POSITIONS THAT HAVE *PRIMARILY* INVOLVED THE USE OF KNIVES? (Please circle) YES NO

IF YES, WHICH COMPANY: \_\_\_\_\_

GIVE BRIEF DETAILS: \_\_\_\_\_

HOW LONG FOR: \_\_\_\_\_

HAVE YOU WORKED IN POSITIONS THAT INVOLVED PACKAGING AND PALLETISING? (Please circle) YES NO

IF YES, WHICH COMPANY: \_\_\_\_\_

GIVE BRIEF DETAILS: \_\_\_\_\_

HOW LONG FOR: \_\_\_\_\_

DO YOU HOLD A CURRENT FORK LIFT DRIVERS LICENCE? (Please circle) YES NO

IF YES, WHICH COMPANY: \_\_\_\_\_

PLEASE DESCRIBE: \_\_\_\_\_

HOW LONG FOR: \_\_\_\_\_

HOW WOULD YOU BEST DESCRIBE YOUR FORK LIFT EXPERIENCE/SKILL ON THE FOLLOWING SCALE: (Please circle)

1 2 3 4 5 6 7 8 9 10

“1” BEING JUST RECEIVED MY LICENCE, “5” HAVING MY LICENCE FOR 5 YEARS AND USED AT LEAST WEEKLY AND “10” HAVING MY LICENCE FOR 20 YEARS AND AM STATE FORKLIFT CHAMPION!

DO YOU HOLD A TRUCK LICENCE?(Please circle) YES NO

IF YES, WHICH CATEGORY: \_\_\_\_\_

IF YES, WHICH COMPANY: \_\_\_\_\_

GIVE BRIEF DETAILS: \_\_\_\_\_

HOW LONG FOR: \_\_\_\_\_

HAVE YOU WORKED IN THE FOOD INDUSTRY PRIOR TO APPLYING FOR A POSITION WITH BARKER BOY? (Please circle) YES NO

DO YOU POSSESS A GENERAL UNDERSTANDING OF FOOD SAFETY, PERSONAL HYGIENE, HAZARDS AWARENESS AND OTHER RELATED CONCEPTS?

IF YES, PLEASE PROVIDE A BRIEF OVERVIEW OF YOUR WORK HISTORY IN THIS AREA:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

PLEASE DESCRIBE ANY SKILLS EITHER NOT ASKED ABOUT, OR THAT YOU HAVE NOT TALKED ABOUT IN THE APPLICATION FORM, THAT YOU CONSIDER MAY BE OF USE AT BARKER BOY PROCESSING.

| SKILL | DESCRIPTION | COMPANY |
|-------|-------------|---------|
|       |             |         |
|       |             |         |
|       |             |         |
|       |             |         |
|       |             |         |

IT IS NOT COMPULSORY TO ANSWER THE FOLLOWING:

Part of Barker Boy’s success over the years has been management’s awareness of the goals Barker Boy’s employees work towards. There are many ways the company can provide to assist these goals being met, goals which have been both personal and company/position orientated.

This awareness can help build a career path profile, which may lead to for example promotions within the organization or position specific training opportunities.

The relationship between employee and employer is very much of a 2 way nature and we believe that not only will Barker Boy benefit from the having the right employee, that the employee will also benefit as well.

As such we would appreciate if you could provide us with your thoughts on your goals not only with us ie where do you see yourself in say 1, 2 or 3 years time at Barker Boy, but more importantly how your employment with Barker Boy Processing can help you achieve your own personal goals.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**DECLARATION BY APPLICANT**

I DECLARE

- a) That the answers to the foregoing are to the best of my knowledge true and correct in every way.
- b) That if my application for employment is successful I will be bound by and will at all times observe and respect such terms and conditions of my employment and such policies and rules as may from time to time be promulgated, specified or otherwise stipulated by my employer.
- c) That I understand that any erroneous or false declaration made by me in this application may result in disciplinary action or possible dismissal.
- d) That I understand that is application is successful my employment is subject to a satisfactory medical report provided by a Medical Practitioner nominated by the employer. (Such examination will be paid for by the employer.)

Signature of Applicant \_\_\_\_\_

Date \_\_\_\_\_

**FOR OFFICE USE ONLY**

APPLICANTS INFORMATION VERIFIED                      YES                      NO

REFEREES CONTACTED                                      YES                                      NO

UNSUCCESSFUL    YES    NO

HOLD FOR ..... MONTHS                              YES                                      NO

INTERVIEW    YES    NO

INTERVIEW DATE \_\_\_\_\_ TIME \_\_\_\_\_ LOCATION \_\_\_\_\_

INTERVIEWER \_\_\_\_\_

OTHER POSITIONS APPLICANT MAY BE SUITABLE FOR:

\_\_\_\_\_  
\_\_\_\_\_