

HAWKES RACING APPLICATION FOR EMPLOYMENT

SURNAME: _____ FIRST NAME(S): _____

ADDRESS: _____ DATE OF BIRTH: _____

_____ SEX: _____

TELEPHONE NUMBERS: _____ (HOME) _____ (MOBILE)

E-MAIL: _____

POSITION APPLIED FOR: _____

ARE YOU LEGALLY ENTITLED TO WORK IN AUSTRALIA? YES NO

If you are not an Australian Citizen, please attach documentation to prove entitlement to work in Australia, ie Passport & Visa.

PLEASE TELL US ABOUT WORK THAT YOU HAVE DONE INVOLVING HORSES

EMPLOYMENT HISTORY (up to past 10 years) starting with current or most recent employer

- Continue on a separate page if necessary

<i>DATES</i>	<i>COMPANY</i>	<i>ADDRESS</i>	<i>POSITION HELD</i>	<i>REASON FOR LEAVING</i>

Please answer all of the following questions:

1. DO YOU HAVE A CURRENT DRIVERS LICENCE? YES NO

If Yes, what Class of Licence do you have and do you have your own transport?

2. HAVE YOU PREVIOUSLY WORKED FOR THIS COMPANY? YES NO

If yes, give dates

4. DO YOU HAVE A CURRENT WORKER'S COMPENSATION CLAIM? YES NO
If Yes, please give details

5. ARE YOU ON ANY MEDICATION OR UNDER ANY DRUG THERAPY? YES NO
If Yes, you may be asked to undertake a medical examination to ensure your safety for the job you have applied for

6. WORK WITH HORSES IS PHYSICALLY DEMANDING. IF YOU HAVE ANY PHYSICAL DISABILITY or MEDICAL CONDITION, OR IF YOU HAVE HAD ANY PREVIOUS SERIOUS INJURIES OR OPERATIONS THAT MIGHT RESRICT YOUR ABILITY TO DO THE JOB PLEASE TELL US

*(Where this applies, attach details/explanations that might help us to determine your suitability for work with race horses)
You will be required to have a medical examination.*

7. HAVE YOU EVER BEEN CONVICTED OF A CRIMINAL OFFENCE? YES NO
If Yes, give details

8. REFERENCES
Hawkes Racing would like to contact people who are willing to provide you with a reference. Please provide the names and contact details of 3 people who have agreed to do this for you, one of which must be your current or most recent employer IF you have worked.

NAME, ADDRESS AND TELEPHONE NUMBERS OF PEOPLE HAWKES RACING MAY CONTACT

- 1) _____
- 2) _____
- 3) _____

9. DO YOU REQUIRE ACCOMODATION? YES NO

IMPORTANT
PLEASE READ THE FOLLOWING DECLARATION *BEFORE SIGNING THIS APPLICATION.*
I DECLARE THAT

- a) *The information above is true & correct to the best of my knowledge. I understand that any false declaration made by me in this application may result in dismissal.*
- b) *Any employment offer is conditional on a probation period, during which I can be dismissed if I do not abide by Hawkes Racing policies and meet the required standards as explained to me by my employer.*

If you do not understand this declaration, please contact Hawkes Racing for assistance

I, (print name)
have read, understood & completed this application for employment.

SIGNATURE _____

DATE / /