

# **CANDIDATE REGISTRATION FORM**

# **PERSONAL DETAILS -**

Date: / /	Do you have a YES   NO Job Seeker ID?:
Date of Birth: /	Job Seeker ID#:
Title: Mr   Mrs   Ms   Miss	
Given Name:	
Surname:	
Position Applied For:	
Address:	
Suburb:	State: Postcode:
Home Phone:	Mobile Phone:
Email Address:	

# **EMERGENCY CONTACT -**

Title: Mr   Mrs   Ms   Miss	
Name:	
Relationship:	
Address:	
Suburb:	State: Postcode:
Home Phone:	Mobile Phone:



# AVAILABILITY:

Days available for w	Days available for work: (please circle)						
Monday Tuesday Wednesday Thursday Friday Saturday Sunday ANY DAYS							
<b>Available for the foll</b> (please indicate specified)	-						
Morning	Afternoon	Night	ALL				
<b>Areas you would be</b> (please circle at least o							
South of City Area	North of City Area	All City Area Inter	state Overseas				
Other – (please Indicat	e):						
Are you available for	work now?: YES	NO					
If NO, what date wo	uld you be next avai	ilable?:					
TRANSPORT:							
What is your main m (please circle)	-						
Car Ut	e Van	Motorbike Bicyc	le Public Transport				
Drivers License Num	ber:						
<b>Type:</b> ( <i>C, HR, etc</i> )		_ State:					
PERSONAL PROTECTIVE EQUIPMENT (PPE) CHECKLIST							
Please tick all items	that you currently o	own:					
Hi Visibility Shir	t 🛛 🗆 Long Pants	Hard Hat	Safety Boots				



## SKILLS CHECKLIST

# Please only tick the skills that are relevant to your work experience

1st Aid Certificate	Customer Service	Internet Experience	<ul> <li>Plastics Industry</li> <li>Experience</li> </ul>
Accounting Assistant	Dangerous Goods Cert	Inventory Controller	□ Power Point Presentation
□ Accounts Clerk	🗆 Data Entry	□ Invoicing	Process Worker
□ Administration	Database Experience	□ Joy Mining Induction	Project Manager
Air Freight Industry	Despatch Experience	□ Knife Experience	Purchasing Administrator
□ Air Conditioning	Diesel Mechanic TQ	Labourer	Quality Assurance
□ ANSTO Clearance	Dogman Ticket	Laboratory Assistant	Quality Control
Accounts Payable	Drill Operator	□ Labelling	Rail Safe Tracks Operator
□ Accounts Receivable	<ul> <li>Electrical Component knowledge</li> </ul>	□ Landscaping Experience TQ	<ul> <li>Rail industry safety induction</li> </ul>
Assembly Worker	Electrician Experience	Leading Hand	□ Receptionist
Baines Masonry Induction	Electronics Process Work	□ Licence C	□ Receiving Experience
Banking	Electrician TQ	□ Licence HC	Renderer Experience
□ Bar Coding	□ Elevated Platform Licence	□ Licence HR	Retail Shop Work
🗆 Barista	Excavator Licence	□ Licence LR	RF Scanning Experience
Bas Counting	Explosives Experience	Licence - Manual Car	Riggers Ticket
Blender	Extruder Operator	□ Licence MC	Rope - Tying knots
□ Blow Moulding	□ Fencing Experience	□ Licence MR	□ Roster Preparation
Blue Print Drawings read	Food Industry Experience	Load/Unload Semi Trailers	□ Sales Representative
□ Basic Office Skills	Fitter - Dye	□ Logistics Experience	□ SAP Inventory System
Boilermaker experience	Fitter-Mining Equipment	□ Management Logistics Exp.	Secretarial
Boilermaker TQ	□ Fitter/Turner	□ LO Stock pickers licence	<ul> <li>Sewing Machine</li> <li>Industrial Exp</li> </ul>
Bond Stores Experience	□ Fork NSW Licence/AUS	Macros Experience	□ Sheet Metal Operator
Book Keeping	Forklift Driver- Process	Machine Operator	<ul> <li>Shrink-wrap Machine</li> <li>Operator</li> </ul>
Brickies Labourer	<ul> <li>Fork Attachments</li> <li>Experience</li> </ul>	Maintenance Experience	□ Soldering



Bricklayer TQ	Fork 40 Tonne Container Exp	Manufacturing Experience	Spray-painting Exp
Budgeting Experience	<ul> <li>Fork/Double Deep Tynes</li> <li>Exp</li> </ul>	Masonry Experience	Spray-painting TQ
□ Bundling Experience	<ul> <li>Forklift High Reach</li> <li>Experience</li> </ul>	Meat Industry Experience	<ul> <li>Spreadsheet Creation</li> <li>Exp.</li> </ul>
Call Centre Skills	<ul> <li>Fork-Axle Weight Loading</li> <li>Exp</li> </ul>	Mechanical Aptitude	Staff Training
Card- Warehouse Blue	Fork Grab Experience	Motor Mechanic	Stocktaking
Card - Construction White	<ul> <li>Fork Skid Steer (LS)</li> <li>Licence</li> </ul>	Microsoft Access	□ Store person
Carpenter Experience	<ul> <li>Fork Experience -</li> <li>Production</li> </ul>	Microsoft Excel	□ Supervisory Skills/Exp
Carpenter TQ	<ul> <li>Fork Experience –</li> <li>Warehouse</li> </ul>	Microsoft Word	Supermarkets Experience
Cattle Yard Experience	□ Freezer Experience	Mining Experience	Switchboard Experience
<ul> <li>Claim Experience- Accounting</li> </ul>	Freight Control	Moulding Plastics	Trades Assistant
Cleaner	Freight Forwarding Exp	П МҮОВ	<ul> <li>Trades Assistant- Engineering</li> </ul>
Cleaning Experience	Freight Sorter	<ul> <li>OHS Experience /Knowledge</li> </ul>	Trades Assistant-Mining
Clerical Duties	Garden/Parks & Garden	Operations Manager	🗆 Tarps - Semi Trailers
CNC Machine Operator	General Office Duties	Personal Assistant	□ Traffic Control Certificate
CNC Programmer	□ GMP Trained	Packer	□ Transport Allocator
Coles Induction Card	Guillotine Worker	Pallet Jack Experience	□ Typing wpm 50 +
Cold Storage	□ HACCP Trained	Pallet Jack Electric Exp	Welder - 2nd Class
Computer Literate	Hazardous Chemicals	Pallets - stacking	🗆 Welder - MIG
Communications Skills	Heavy Lifting	Pallet wrapping by hand	U Welder - Stick
Concrete Work	<ul> <li>Heavy Vehicle Mechanic</li> <li>TQ</li> </ul>	Payroll	🗆 Welder - TIG
Confined Space	Import/Export Freight	Petty Cash Handling	Welder - Licenced
Consignment Notes	Industrial Cleaning	Pick/Packer	Windows Vista
Container unload/load by hand	Injection Mould Operator	Planograms	□ Windows XP
<ul> <li>Core Drilling</li> </ul>	Internet Experience	Plant Mechanic	

### **\*TQ** = Trade Qualified



### PAY INFORMATION

Tax File Number:		
Banking Details:		
A/C Name(s):		
Bank:	Branch:	
BSB No:	A/C No:	

### **Declaration:**

I, the undersigned, hereby state that the information supplied by me in this application form and within my resume is true and correct, and hereby authorize Makibe Aust. to use the information supplied on this form accordingly and may contact referees provided for the purposes of ascertaining my suitability for employment.

SIGNATURE:	DATE:	/	/
NAME: (please print)			

### Interview Notes: (office use only)

Candidate Code:				
Job Order Code:				
Weekly/Fortnightly:				
Pay Rate:				
Commencement				
Date:	/	/		
Interviewed By:				
Date:	/	/		



# SUPERANNUATION FORM

### 1. Choice of superannuation fund

I request that all my future superannuation contributions be paid to: *(tick <u>one</u> of the boxes below)* 

- □ my employer's nominated superannuation fund (SunSuper) you do not need to continue with this form
- □ my own choice of superannuation fund *Please answer questions 2 4*

### 2. Your details

Name: (please print)

Employee Identification Number: (if applicable)

Tax File Number (TFN): **3. Details of my chosen superannuation fund**Fund Name:

Fund Address:

Suburb:

Suburb:

State:

Postcode:

Member Number: (if applicable)

Account Name:

Superannuation fund's Australian

business number (ABN): (if applicable)

Superannuation product identification

number: (if applicable)

Fund Phone Number:

### 4. Appropriate documentation

I have provided:

- □ A letter from the trustee stating that this is a complying fund or retirement savings account (RSA) or, for a self-managed superannuation fund, a copy of documentation from the ATO confirming the fund is regulated **and**
- $\hfill\square$  Written evidence from the fund stating that they will accept contributions from my employer,  $\underline{\textit{and}}$
- $\hfill\square$  Details about how my employer can make contributions to this fund.

Your employer is not required to accept your choice of fund if you have not provided the appropriate documents.



# WORKPLACE HEALTH AND SAFETY INDUSTRIAL QUESTIONNAIRE

Please complete the following questionnaire in full:

### 1. If you have sustained a work-related injury, you should immediately report it to:

$\Box$ My supervisor $\Box$ The person next to me $\Box$ Makibe Aust. $\Box$ My private insurance					
2. You are covered for Workers Compensation	on by Makibe Aust.	TRUE	FALSE		
3. You should report hazards that you find a workplace.	t a client's	TRUE	FALSE		
4. Housekeeping can assist with the prevent	ion of fires.	TRUE	FALSE		
5. Electrical tools and/or appliances that do inspection tag are allowed to be brought of the br		TRUE	FALSE		
6. You can enter a confined space if you have confined space entry.	e not been trained ii	TRUE	FALSE		
7. All workers have an obligation to ensure t the safety of their fellow workers.	heir own safety and	TRUE	FALSE		
8. In the case of a serious injury to a fellow important not to panic.	worker, it is very	TRUE	FALSE		
9. Only permanent employees are required t hearing protection.	o wear eye and	TRUE	FALSE		
10.Casual employees do not have to follow sa	afe work procedures	TRUE	FALSE		
11.Using drugs and/or alcohol is not permitte	ed in the workplace.	TRUE	FALSE		
Please tick the c	orrect answer				

- 12.You are packing items into boxes, after a time you feel soreness in your back. Do you:
  - □ Keep working as you don't want to jeopardize your job?
  - □ Slow down a bit and hope that the pain will go away?
  - □ Notify your supervisor and Makibe Aust. consultant and obey their instructions?

# 13.You are working at a worksite and your supervisor tells you to perform a task you feel to be unsafe or that you are not trained to do. Do you:

- □ Perform the task as you do not want to jeopardize your job?
- □ Advise your supervisor that the task is unsafe or that you are not trained to perform it and contact Makibe Aust.?

#### 14. When lifting and carrying material, you should:

- □ Work as quickly as you can.
- $\hfill\square$  Lift more than you are capable of to get the job finished faster.
- □ Lift correctly with your legs, not with your back and only lift what you can comfortably handle, carrying the load close to your body and cease if you feel pain.

# 15.Two types of Personal Protective Equipment that should be worn when operating a hand-held grinder are:

□ Safety Glasses □ Hard Hat □ High-Vis Vest □ Wedding Ring □ Safety Gloves

#### 16. The main person responsible for your health and safety is:

□ Mum & Dad □ Yourself □ Spouse/Partner □ The person next to you



## **HEALTH HISTORY**

Are you now, or have you ever suffered from any of the following conditions, injuries or disabilities?

If you answer yes to any of the below, you must <u>legally</u> notify Makibe Aust. in writing before commencing work.

Со	ndition	Details / Year Occurred
	Heart disease?	
	High blood pressure?	
	Abnormal shortness of breath, leg pain or chest pain or exertion?	
	Lung disease (e.g. asthma, bronchitis, emphysema, tuberculosis)?	
	Epilepsy, fainting attacks, fits, blackouts or head injury?	
	Problem with balance or coordination?	
	Migraine or frequent headaches?	
	Hernia or rupture?	
	Diabetes?	
	Thyroid disease?	
	Hearing loss or deafness?	
	Eye/vision problems (including wearing glasses or contact lenses)?	
	Do you have any colour blindness?	
	Any sensitivity to chemicals, dust, fumes, solvents or other substances?	
	Anxiety, stress reaction or depression?	
	Any fractures?	
	Do you have difficulty with standing for long periods?	
	Have you ever had any claims under Workers Compensation?	
	Do you have difficulty with bending repeatedly?	
	Do you have difficulty with lifting heavy objects?	
	Back pain lasting more than two weeks?	
	Joint problems, pains, injuries or arthritis?	
	Tennis elbow or golfer's elbow?	
	Occupational overuse syndrome (OOS) or repetitive strain injury (RSI) e.g. Tendonitis, Carpel Tunnel Syndrome?	
	Foot problems or problems with footwear?	
	Allergies (hay fever, sinusitis, urticarial/hives)?	
	Liver disease (e.g. jaundice, hepatitis, cirrhosis)?	
	Kidney or bladder disease?	



Skin disease (e.g. psoriasis, dermatitis, eczema)?	
Any form of cancer or tumour?	
Any abnormal blood or pathology test?	
Night blindness or problem seeing at low levels of illumination?	
Upper limb or shoulder pain?	
Have you ever worked under conditions or with substances, which may have been hazardous to your health (e.g. toxic chemicals, noise, dusts, asbestos, and radiation)?	
If the answer to the above question is yes, do you have any current restrictions?	
Do you suffer from fear of heights?	
Have you ever had any operations or surgical treatment?	
Have you been absent from work or full time education through illness or injury for two or more weeks at any time?	
Do you have difficulty with lifting repeatedly?	
Do you have a social drug or alcohol medical problem?	
Do you have any allergies to medications or chemical substances?	

**NOTE**: People with certain medical conditions are at risk of aggravating their conditions when working on certain sites. To help us identify and advise appropriate supervisors, you are asked to complete this questionnaire. The questionnaire will be reviewed and you will, if necessary, be advised of any specific precautions that you may need to observe during your employment on site.

1.	Have you had any allergies in the past ten 10 years that are not mentioned or included in the above questions?	YES	I	NO
	If YES, please provide details:			

Have you had any injuries in the past 10 years that have required more than 5 days off work, related to workers comp and/or required hospitalisation?
 If YES, please provide details:

Do you have a health condition that has not been marked/ mentioned, that would restrict you from working in a particular area? If so, please indicate here YES | NO and discuss with your Makibe Aust. registration officer at the interview:

If YES, please provide details:

4.	Are there specific work environments or industries you do not wish to be	YES	I	NO
	considered for?	TLS	I	NO

If YES, please provide details:

**\*\*** Failure to disclose existing conditions MAY limit your access to Workers Compensation.



# **TEMPORARY EMPLOYMENT AGREEMENT**

### EMPLOYMENT STATUS AND ENGAGEMENT

You are employed as a casual on-hire employee with Makibe Aust. which means that:

- a) You are employed as a casual employee;
- b) The termination of an Assignment for whatever reason does not of itself constitute the termination of your employment;
- c) The employment relationship is and remains between the Parties to this Agreement and no employment relationship exists, or shall be created, between you and any Client

### TERMINATION OF EMPLOYMENT

As a casual employee, you are employed on a day to day basis. Your employment terminates at the end of each day/shift.

a) We may terminate your employment and this Agreement at any time by notifying you that you will not be offered any further casual engagements or Assignments. You will not be entitled to any notice of termination or payment in lieu.

### OBSERVANCE OF POLICIES AND PROCEDURES

a) You are required to fully comply with our internal policies, or those of a Client, which apply to your employment or Assignment as varied and amended from time to time. You acknowledge and agree that any such policies and procedures take effect as directions given by us and not as mutually enforceable obligations.

### <u>ACKNOWLEDGEMENT</u>

- a) You acknowledge and understand that you are a casual employee of Makibe Aust. subject to the terms and conditions of this Agreement.
- b) You acknowledge and understand that you are not an employee of any Client company that you are placed at on Assignment at from time to time.

I ..... hereby apply for temporary employment through Makibe Aust. on a per assignment basis,

- I understand the conditions of temporary employment are as follows,
  - I will only be paid for actual hours worked and that each assignment will represent a discreet period of employment
  - $\circ$   $\,$  Depending on my availability, I may accept or reject your offer of employment  $\,$
  - My rate of pay will be the rate as determined at the commencement and acceptance of each assignment
  - Included in my hourly pay is a component of the Modern Awards which compensates me for Sick Leave, Annual Leave, and Public Holidays
  - Once my earnings exceed \$450.00 per month, I will be eligible to have superannuation contributed on my behalf to the appropriate superannuation fund.



The amount paid on my behalf will be 9.5% of my gross ordinary time earnings (In accordance with ATO Superannuation guide lines)

- o I must notify Makibe Aust. at least 2 hours prior to the commencement time, if I am unable to attend an assignment during any period of my employment.
- I agree to keep confidential any information obtained during any assignment.
- I agree that my payment for the previous week's work may be adjusted should my timesheet not agree to wages paid.
- I agree that I will not under any circumstances seek or accept a direct offer of employment whether temporary or permanent from any employer to whom I am introduced without first notifying Makibe Aust.
- I have read and understood the WH&S requirements as outlined in the Candidate Guidelines.
- I acknowledge that my work week is from Monday to Sunday. My payroll will be processed the following Wednesday and payment will be made by Makibe Aust. by Friday.

### **Temporary Employment Agreement Acknowledgement**

I have read and understood the Makibe Aust. document as above.

SIGNATURE: DATE: / /

NAME: (please print)



# MAKIBE AUSTRALIA CASUAL EMPLOYEE INFORMATION

----- Take this page with you -----

### **Office Details:**

- Address: 4/17 Warby St. Campbelltown
- Hours: Monday to Friday 9.00am 4.30pm
- **Phone:** (02) 4631 6700
- **Fax:** (02) 4631 1945
- After hours service: Please call the main office number (02) 4631 6700, (*not a consultants' mobile*) this number is diverted to the staff member on call.

### **Payment Details:**

### The working week is Monday to Sunday.

- Please ensure your bank account details are correct and you have supplied your tax file number and superannuation details (if any) before you commence work.
- Please note it is <u>your</u> responsibility to ensure your hours are correct so your supervisor can authorise them.
- **Pay day is** *Thursday* **for the previous working week.** If you have not received your pay by the Friday, please contact payroll (02) 4631 6700.

### Work Assignments:

- You are employed by Makibe Australia Pty Ltd and <u>not</u> the host employer.
- **Punctuality:** please ensure you arrive for work 10 15 minutes early.
- You <u>must</u> call the office for any of the following reasons:
  - You cannot attend work for any reason. Please give as much notice as possible to enable us to find a replacement.
  - $\circ$   $\;$  The client wishes to extend your assignment.
  - The client offers you a permanent position.
  - You have finished your assignment.
  - You have been involved in an accident or on site "incident".
- If you fail to show up for your assignment and do not contact us, we will deem that you have terminated your employment with Makibe Australia Pty Ltd.

### Work Health & Safety:

• Correct Personal Protection Equipment (PPE) must be worn at all times on any site. Failure to do so will result in you being asked to leave the site.