



Application Cover Sheet

- To assist our Recruitment Team to process your application, please complete this form and **attach it to the front of your application**.
- Personal information provided on this form is protected by the *Privacy Act 1988* and will be used only for recruitment purposes.

1. Particulars of the Advertised Position

| | |
|------------------------------|--|
| Reference or Position Number | Position Title and Classification |
| Date Advertised | Source of Advertisement (eg <i>Gazette</i> , <i>Canberra Times</i>) |

2. Personal Particulars

| | | | |
|--|---|---------------|-------------------|
| Title (eg <i>Mr</i> , <i>Mrs</i> , <i>Ms</i> , <i>Dr</i>) | Surname/Family Name | Given Name(s) | Preferred Name(s) |
| Date of Birth (optional) | Contact telephone numbers Work May we contact you at work? Yes <input type="checkbox"/> No <input type="checkbox"/> Home Mobile | Email address | |
| Male <input type="checkbox"/> Female <input type="checkbox"/> | Postal address | | Postcode |

3. Eligibility—Citizenship

Section 23 of the *Public Service Act 1999* requires that APS employees must be Australian citizens.

Are you an Australian citizen? Yes No
 If not, have you applied for citizenship? Yes No

4. Eligibility—Redundancy benefit recipient

Have you taken a redundancy benefit from the Australian Public Service or a non-APS Commonwealth within the past 12 months? Yes No
 If Yes, on what date and from which Agency?

5. Diversity, Access and Equity

Answering these questions will assist us in workforce planning; diversity, access and equity data. (Answering is optional, although responses will help us provide appropriate assistance where needed).

Are you an Australian Aboriginal, and Australian South Sea Islander or Torres Strait Islander? Yes No
 Are you a person with a disability? Yes No
 Are you from a non-English speaking background? Yes No
 What is your gender? Male Female

Please tell us if you require additional support to help you participate in this selection process (for example would you need a language interpreter at interview, or is there some sort of equipment or mobility assistance needed)?

6. Employment Details—Australian Public Service Employees

| | |
|--|---|
| Are you currently employed in the Australian Public Service? Yes <input type="checkbox"/> No <input type="checkbox"/> If No, please go to Section 7 | Ongoing (Permanent) <input type="checkbox"/> Non-ongoing (Temporary) <input type="checkbox"/> |
| Current Department/Agency | Classification—Substantive Classification—Actual |
| Australian Government Service (AGS) Number | Current Salary |

7. Employment Details—Applicants who are NOT Australian Public Service Employees

| | |
|---|----------------------------------|
| Current Employer (name and address) | |
| Your Role or Position in the organisation | Current Salary or Salary Package |

8. Referee Details

Please provide details for two people who are in a position to comment on your suitability for this position. One of these should be your current supervisor or manager. If you have no work history, please nominate people who know you well. Written referee reports are not required at this stage. We will contact your referees if and when we need a referee report.

| | First Referee | Second Referee |
|--|--|--|
| Name | | |
| Organisation | | |
| Current role | | |
| Contact phone number | | |
| Email address | | |
| What was/is your relationship to this Referee? | | |
| How long has this relationship existed? | | |
| Is there any sensitivity around us contacting this Referee? | Yes <input type="checkbox"/> No <input type="checkbox"/> | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| If Yes, would you like us to inform you before we contact your Referee? | Yes <input type="checkbox"/> No <input type="checkbox"/> | Yes <input type="checkbox"/> No <input type="checkbox"/> |

9. Other Information

If there is any other information relevant to your application for this position that you think we should know, and it is not mentioned elsewhere, please add it here.

10. Checklist Please ensure that you have completed, signed and dated the following documents before submitting your application as described in Part 4 of the Applicant Information Kit.

- Application Cover Sheet
- Curriculum Vitae (CV)
- Statement of Claims addressing the selection criteria

11. Declaration

By submitting this form (electronically or otherwise) I confirm that, to the best of my knowledge, the information I have provided in this form, and the attachments to it, is true and correct. I understand that providing any false or misleading information or making material omissions may make me ineligible for employment with ComSuper.

/ /

Signature