



APPLICATION FORM

Applicant Information			
Full Name:			
Date of birth:		Town/City of Birth:	
Current address:			
City:		State:	Post Code:
Phone:		Email:	
Do you identify as an Aboriginal and/or Torres Strait Islander?			YES or NO
School Information			
What was the highest level of schooling completed?			
What year did you complete this? (2017)			
Which high school did / do you attend?			
Do you hold a USI Number? If yes – please provide			
Have you previously completed a qualification?		YES or NO	
If yes, please provide details :			
Below are a list of industries that we offer, please nominate (with a tick) top 2 traineeships you would like to be considered for :			
Administration	<input type="checkbox"/>	Information Technology	<input type="checkbox"/>
Aquatics	<input type="checkbox"/>	PE Departments / Schools	<input type="checkbox"/>
Banking / Finance	<input type="checkbox"/>	Retail	<input type="checkbox"/>
Sport & Recreation			<input type="checkbox"/>
Other:			<input type="checkbox"/>
Are you looking for a Full Time, Part Time or School Based Traineeship?			
Employment Information			
Are you currently employed?		Yes or No	
If yes, are you employed Full Time, Part – Time or Casual basis?			
Employer Name :			
Job Title :		When did you commence?	
<i>Please provide a copy of your current resume and school report to the application</i>			
ACKNOWLEDGEMENT			
I ACKNOWLEDGE THAT THE DETAILS PROVIDED ARE TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE, ANY FALSE INFORMATION PROVIDED MAY RESULT IN FAILURE TO SECURE A TRAINEESHIP			
Signature:		Date:	

PLEASE EMAIL COMPLETED APPLICATION TO : admins@afisportsready.com.au OR POST : PO Box 43 NORTH ADELAIDE SA 5006

OFFICE USE ONLY

Comments:

REFFRERALS:

HOST EMPLOYER	ROLE	OUTCOME

CHARGE OUT :

SKILL A	SKILL B	SKILL C