



# Application for Employment

If emailing this as an interactive form, save it and send to:  
wello@ogdenscoaches.com.au

## Personal Information

**Application treated as confidential**

Family Name \_\_\_\_\_ Given Names \_\_\_\_\_

Date of Birth \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ Postcode \_\_\_\_\_

Telephone (Home) \_\_\_\_\_ Mobile \_\_\_\_\_

## Licence / Qualifications

Drivers Licence No \_\_\_\_\_ Class \_\_\_\_\_ Exp Date \_\_\_\_\_

Drivers Authority No \_\_\_\_\_ Exp Date \_\_\_\_\_ Medical Ex Date \_\_\_\_\_

Have you attached a current RMS driver history record?  Yes  No

*A current RMS driver history will be required at interview*

Have you commenced or completed a Certificate III in Transport and Logistics?

Yes  No

Do you have any objection in undergoing a traineeship in Transport and Logistics

Yes  No

## Previous Employment

(Please list at least previous 5 years, Start with most recent)

Employer	Dates of Employment	Type of Work	Reason Left
	to		
	to		
	to		
	to		
	to		
	to		
	to		

## Employment

1 Are you an Australian Citizen or permanent resident?  Yes  No  
*If you answered Yes to question 1 please go the Question 3*

2 Do you hold a Visa that legally entitles you to work in Australia?  Yes  No

3 In the past 10 years have you been convicted of a criminal offence ?  Yes  No  
*If you answered YES please provide details*


4 Are there any criminal convictions pending against you in Australia ?  Yes  No  
*If you answered YES please provide details*


## References

Please list at least two contactable referees

Name of referee \_\_\_\_\_ Phone Number \_\_\_\_\_

Employer \_\_\_\_\_ Position Held \_\_\_\_\_

Name of referee \_\_\_\_\_ Phone Number \_\_\_\_\_

Employer \_\_\_\_\_ Position Held \_\_\_\_\_

Name of referee \_\_\_\_\_ Phone Number \_\_\_\_\_

Employer \_\_\_\_\_ Position Held \_\_\_\_\_

## Other Qualifications

Do you have a current Working with Childrens clearance  Yes

WWC number

Do you have any other licences or qualifications?  Yes  No  
*(If yes, please detail below)*


## Driving Experience

Please outline any heavy vehicle driving experience in either trucks or buses, name company work undertaken for, type of work, type of vehicle and length of service


## Accident History

Have you had any motor vehicle accidents in the past 5 years? Please detail


## Health

If you answer YES to any of the questions below, please provide details including medications

As a bus driver, you will be a "Transport Safety Worker" This has specific physical inherent requirements that must be met. As part of this application, Ogden's Coaches may require you to undertake a medical assessment by an appointed medical practitioner. The following information is also used to assess your suitability to be employed as a Transport Safety Worker.

- 1 Have you ever suffered from a serious medical condition, e.g. a heart attack, stroke or back injury?  Yes  No
- 2 Do you have any pre existing injuries or illness that may become aggravated or effect your work ability?  Yes  No
- 3 As a part of your job you will be required to complete simple reports for various reasons, do you have any litereracy difficulties?  Yes  No
- 4 Do you have any medical conditions that may effect your mental alertness or have the ability to affect your work?  Yes  No
- 5 Do you have any hearing or eyesite problems?  Yes  No
- 6 Drug and or alcohol screening is a mandatory process, Do you have any objection to drug or alcohol screening tests being conducted while employed by Ogden's Coaches?  Yes  No
- 7 Have you ever made a claim for workers compensation benefits? If 'yes' please provide details of all claims  Yes  No


- 8 Do you have any physical restrictions that may prevent or restrict you from rotating your back  Yes  No
- 9 Do you have problems maintaining a seated position for long periods?  Yes  No
- 10 Have you been diagnosed with a sleep disorder such as sleep apnea?  Yes  No
- 11 The bus driver seats have a weight bearing limitation. What is your current weight?

## Applicant Agreement

### IT IS AGREED BY THE APPLICANT THAT:-

- 1 I give permission for Ogden's Coaches to obtain information about my driving record, criminal report, Australian work rights and previous work history.
- 2 By submitting this application, you understand and accept that Ogden's Coaches may use CCTV cameras on Company vehicles and premises. These cameras will be openly visible, and are to be used for passenger and staff safety and the monitoring of driver conduct.
- 3 No action will be taken against Ogden's Coaches or any other party for damages on account of requesting or supplying such information.
- 4 The applicant will complete additional tests as Ogden's Coaches requires. These tests could include medical, drug and alcohol tests.
- 5 Employment is subject to an ongoing "Working with Children" number check, in accordance with the Child Protection Regulation 2013.
- 6 As a condition of employment, the applicant will undertake all necessary Ogden's Coaches Training.
- 7 If offered employment, a six month qualifying period will apply and employment may be terminated without notice during this period.
- 8 If offered employment, additional information will be supplied by the applicant to enable employment files to be completed. (i.e. payroll details)
- 9 If offered employment, the applicant will inform Ogden's Coaches immediately if the applicant's driver's licence or driver authority is suspended / cancelled or if their WWC status changes.
- 10 If offered employment, the applicant agrees to keep Ogden's Coaches informed of all secondary employment including the driving of heavy vehicles for other companies.
- 11 If offered employment, the applicant will act in accordance with all Ogden's Coaches policies and procedures.
- 12 Terms and conditions of employment will generally be governed by the applicable Award or a ratified Enterprise Agreement
- 13 It is understood that any misrepresentation by me on this application will be sufficient cause for the cancellation of this application or summary dismissal after employment.
- 14 I hereby certify that the information supplied is true and complete to the best of my knowledge.

Signature \_\_\_\_\_ Date \_\_\_\_\_

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