



Application for Employment

PERSONAL DETAILS

Mr Mrs Miss Surname: _____ First Name: _____

Residential address: _____

Suburb: _____ State: _____ Postcode: _____

Mobile Number: _____ Other contact number: _____

Email address: _____

EDUCATION & QUALIFICATIONS

Please tell us about your education history and any qualifications you hold:

School/Institution attended	From	To	Level/Qualification achieved

Are you currently studying? Yes No If yes, please specify: _____

What is your mode of study? Full time Part time External

EMPLOYMENT HISTORY

Please tell us about your employment history:

Employer	From	To	Position	Reason for leaving

Have you previously been employed by the Rigters Supermarket Group? Yes No

If yes, please provide details:

Store name: _____ Position held: _____

Period of employment – Date from: _____ Date to: _____

Reason for leaving: _____

Do you have any objection to inquiries to your present employer regarding qualifications and character?

Yes No



EMPLOYMENT PREFERENCES

Preferred Store: please tick all that apply:

- Queens Supa IGA Rigters Supa IGA Wonthella Supa IGA
 Cellarbrations Central Cellarbrations at the Queens Cellarbrations Wonthella

Preferred Status:

- Full time Part time Casual Shift work

Preferred Position: please tick all that apply:

Management

- Store Manager
 Department Manager

Service Assistant

- Checkout
 Produce
 Meat
 Bakery
 Grocery
 Seafood
 Cold Stores
 Liquor

Tradesperson

- Qualified Butcher
 Qualified Baker
 Qualified Pastry Cook

Apprenticeship

- Butcher
 Baker

Traineeship

- Retail Traineeship

Warehouse

- Warehouse Supervisor
 Warehouse Store Person
 Delivery Driver

Other

- Merchandising
 Administration
 Stock Taker
 Other (please specify)

AVAILABILITY

Please mark an "X" your availability to work in the table below:

	AM											PM												
	WN	1	2	3	4	5	6	7	8	9	10	11	MD	1	2	3	4	5	6	7	8	9	10	11
M																								
T																								
W																								
T																								
F																								
S																								
S																								

Please tell us about any hobbies, sports or other activities that may affect your availability for work:

If successful, when are you available to commence employment? _____



RELATIONSHIP TO OTHER EMPLOYEES

Please tell us about any relatives that are currently employed by Rigters Supermarkets.

Relative Name	Store Name	Relationship to you

Please list any other current employees you know: _____

REFERENCES

Please provide 2 Professional Referees below

Name		Email	
Company		Contact Number	

Name		Email	
Company		Contact Number	

Please provide 2 Personal Referees below

Name		Email	
Relationship to applicant		Contact Number	

Name		Email	
Relationship to applicant		Contact Number	



QUESTIONNAIRE

Please complete the following questionnaire.

** Questions 4 & 5 are applicable to Licensed Premise applicants only

1. Are you legally entitled to work in Australia? Yes No
2. Are you willing and available to undertake a Police Clearance check, if required? Yes No
3. Have you ever been convicted of a criminal offence? Yes No
If yes, please provide details: _____
4. Do you hold a current RSA (Responsible Service of Alcohol)? ** Yes No
5. Do you hold a current Approved Managers Certification? ** Yes No
6. Have you ever been dismissed from employment for reasons relating to misconduct or unlawful acts? Yes No
If yes, please provide details: _____
7. Are there any other matters relating to your previous employment or work history that Rigters Supermarkets should reasonably know in accessing your suitability for employment with us? Yes No
If yes, please provide details: _____
8. Will you be willing and available to undergo a pre-employment medical and drug/alcohol screen, if required? Yes No
9. Do you have or have you had any medical or psychological condition, injury or disease that might interfere with your ability to perform to your job role? Yes No
If yes, please provide details: _____
10. Have you ever had a claim for Workers Compensation? Yes No
11. Do you hold a current Australian Drivers Licence? Yes No
12. Are you willing and available to work flexible, rotational and/or extra hours, if required? Yes No
13. Are you willing and available to work Saturdays, Sundays and Public Holidays, if required? Yes No
14. If you are successful in gaining employment, do you agree to complete a pre-start induction, as part of your training, before commencing your employment? Yes No



DECLARATION

Your signature below indicates your consent to the use and disclosure of your personal information as indicated above.

In applying for employment with the Rigters Supermarket Group, hereafter referred to as "the Company", you agree to the following;

- I can provide evidence that I am qualified to work in Australia (e.g. Birth certificate, evidence of citizenship, working visa).
- I confirm that the information on this form is true, correct and complete and I understand that the provision of wrong or misleading information may result in disciplinary action up to and including termination of employment.
- I consent to the Company contacting my referees and using, disclosing and storing the information obtained from my referees to assess my suitability for my employment with the Company.
- If required, I agreed to undergo a pre-placement and subsequent health assessment with a medical provider nominated by the Company to assess my capacity to carry out my duties.
- I understand that failure to disclose details of a previous medical condition or Workers Compensation claim may disqualify me from receiving compensation under the Workers Compensation and Rehabilitation Act of 1981 (as amended) in respect to any aggravation, exacerbation, deterioration of such a medical condition.
- I agree that the Company reserves the right to have me perform duties or roles other than those I was originally hired to do and may transfer me to a different operation, function or location. Should I be transferred, I agree to work in any location operated by the Company under the terms and conditions of that site.

Applicant Signature: _____

Date: _____

Parent/Guardian Signature: _____
(if applicant is under 18)

Date: _____



CONTACT US

Please forward completed application to your preferred store via any of the details below.

Please note; if you would like to apply at multiple stores, you will need to send multiple applications.

Queens Supa IGA

In person: 79 Durlacher Street Geraldton WA 6530
Post: PO Box 1695 Geraldton WA 6531.
Phone: 08) 9964 7044
Email: queens@rsgwa.com.au

Rigters Supa IGA

In person: 179 Durlacher Street Geraldton WA 6530
Post: PO Box 1695 Geraldton WA 6531
Phone: 08) 9921 2307
Email: rigters@rsgwa.com.au

Wonthella Supa IGA

In person: 252 Fifth Street Wonthella WA 6530
Post: PO Box 1695 Geraldton WA 6531
Phone: 08) 9921 4798
Email: wonthella@rsgwa.com.au

Cellarbrations Central

In person: 41 Chapman Road Geraldton WA 6530
Post: PO Box 1695 Geraldton WA 6531
Phone: 08) 9921 8925
Email: cellarbrationscentral@rsgwa.com.au

Cellarbrations at the Queens

In person: 79 Durlacher Street Geraldton WA 6530
Post: PO Box 1695 Geraldton WA 6531
Phone: 08) 9964 6216
Email: queensliquor@rsgwa.com.au

Cellarbrations Wonthella

In person: 252 Fifth Street Wonthella WA 6530
Post: PO Box 1695 Geraldton WA 6531
Phone: 08) 9921 8555
Email: cellarbrations@rsgwa.com.au