



McBRYDE CORPORATIONS PTY LTD

DESIGN, FABRICATION & CONSTRUCTION SPECIALISTS

8-12 Plover Drive (PO Box 34) Yeppoon Q 4703 | Ph: 07 4939 4777 | Fax: 07 4939 3677

EMPLOYMENT APPLICATION FORM - CIVIL

Thank you for your enquiry regarding employment with McBryde Corporations Pty Ltd. This form does not represent an offer of employment and all details supplied by you are **confidential** and will be held on file for 6 months from the date of application.

Please ensure that you have read the Employment Application Guide and completed all sections of this Employment Application Form. Applicants will only be considered if all relevant information is provided.

Personal Details

First Name: _____ Surname: _____

Address: _____

Home Number: _____ Mobile Number: _____

Email: _____

Employment Equity Please indicate if you are member of one of the following groups (Please tick as applicable)

- People with a disability
- People from a non- English speaking background
- Aboriginal or Torres Strait Islander
- Women
- Australian South Sea Islander

Job Type (Please tick as applicable)

- Full Time
- Part Time
- Other _____

Position Applying For (Please tick as applicable)

- Supervisor
- Carpenter
- Concreter
- Plant Operator
- Trade Assistant
- Scaffolder
- Steel Fixer
- Formsetter
- Forklift
- Other _____
- Welding
- Pipe Welding
- Poly Pipe Welding
- Excavator
- Bobcat
- Plant – Other _____

Qualifications (Please tick as applicable)

All qualifications for working on Mine Sites need to be **CURRENT and Black Coal Competent (BCC)**

Qualification	Type / Description	Currency	Copy attached
<input type="checkbox"/> Trade		Date Attained:	<input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> Trade		Date Attained:	<input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> Licence / Certificate		Date Attained:	<input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> Licence / Certificate		Date Attained:	<input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> S1 S2 S3		Date Attained:	<input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> Generic Induction		Expiry Date:	<input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> SGS / BMA Induction		Expiry Date:	<input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> Coal Board Medical		Date Attained:	<input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> Car Drivers Licence		Date Attained:	<input type="checkbox"/> Yes <input type="checkbox"/> No

<input type="checkbox"/> HR Licence		Date Attained:	<input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> MR Licence		Date Attained:	<input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> Defensive Driving		Date Attained:	<input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> Working @ Heights		Date Attained:	<input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> Elevated Work Platform		Date Attained:	<input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> Confined Space		Date Attained:	<input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> First Aid		Date Attained:	<input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> Other		Date Attained:	<input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> Other		Date Attained:	<input type="checkbox"/> Yes <input type="checkbox"/> No

Please provide a description of the Mine Specific SOP's you currently hold (e.g. SOP070 Lifting Equipment):

Induction – Mine Sites (Please indicate if you have been currently inducted on any of the following Mine Sites - tick as applicable)

- Norwich Park Peak Downs Sariji Blackwater Curragh
 Gregory Crinum South Walker Goonyella Riverside Other _____

Privacy Statement

McBryde Corporations Pty Ltd will not disclose any information provided by you in this application, however by signing this application you agree that McBryde Corporations:

- Can make enquiries regarding previous work history from those you have nominated as being a direct supervisor/manager or a referee,
- Retain your application for future reference for no more than 6 months from date of application.

I, _____ declare that I have read and fully understand the conditions of this application for employment with McBryde Corporations Pty Ltd.

Application Checklist (Please tick as applicable)

Have you completed and attached copies of the following:	Office Use Only
<input type="checkbox"/> Employment Application Form	<input type="checkbox"/> Employment Application Form
<input type="checkbox"/> Current Resume	<input type="checkbox"/> Current Resume
<input type="checkbox"/> Cover Letter	<input type="checkbox"/> Cover Letter
<input type="checkbox"/> Copy of your Coal Board Medical (Section 7)	<input type="checkbox"/> Copy of applicant's Coal Board Medical (Section 7)
<input type="checkbox"/> Copy of your Generic Induction card (front and back)	<input type="checkbox"/> Copy of applicant's Generic Induction card (front and back)
<input type="checkbox"/> Copy of your SGS / BMA Induction card (front and back)	<input type="checkbox"/> Copy of applicant's SGS / BMA Induction card (front and back)
<input type="checkbox"/> Copy of all your relevant trade papers, licences, certificates, SOP's	<input type="checkbox"/> Copy of applicants relevant trade papers, licences, certificates, SOP's
	<input type="checkbox"/> Proceed with Application Process

Send Application and associated documents by:

Email: employment@mcbydecorp.com.au

Fax: (07) 49 39 3677

Post: PO Box 34, Yeppoon Qld 4703

In Person: 8 - 12 Plover Drive, Yeppoon Qld 4703