

EXPRESSION OF INTEREST FORM - YARRIE TRAINEE PROGRAM

Personal Details					
First Name:		Surname:			
Phone:		Mobile:			
Address:					
Suburb:			P/Code:		
Email:					
Job Seeker ID: (If applicable)					
Place of Birth:			DOB:		
Prerequisites					
1) The course is run for 8 weeks as paid full time wages , can you commit? 2) Are you willing to work DIDO (Drive-in and drive-out) on a 8:6 roster? 3) Are you prepared to undergo random drug and alcohol screening? 5) Are you prepared to undergo pre-employment medical screening? 6) Do you identify as Njamal Language Group? 1 Yes No.					□No □No □No
Licence					
Drivers Licence:	□ None; □A; □C; □N	∕IR; □HR; □H	C; □Year	held to:	
To apply, please attach the following: 1.					