## **Candidate Application Form**

**Privacy Notice:** The information gathered via this form is relevant to your application only as it relates directly to obligations under the PS Act 1999 or the inherent requirements of the role for which you are applying. The National Mental Health Commission collects your personal information for the purpose of assessing you suitability for potential employment.

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| --- | --- | --- | --- |
| **POSITION DETAILS** | | | |
| **Role title** | Bulk round EL2-APS6 – Various Positions | | |
| **Classification you would like to be considered for** | Executive Level 2 | Executive Level 1 | APS6 |
| **What specialist role/s would you like to be considered for** |  | | |
| **Preferred location** | Canberra | Sydney |  |
| **CANDIDATE DETAILS** | | | |
| **Name** |  |  |  |
| **Address** |  |  |  |
| **Email** |  | **Phone** |  |
| **EMPLOYMENT DETAILS** | | | | |
| **Are you a current APS employee?** | Yes | No (skip next question) |  | |
| **If an APS employee please provide (if not please skip)** | | | | |
| **Status:**  Ongoing  Non-ongoing | **AGS number:** | **Agency name:** | **Substantive**  **classification:**  Choose an item. | |
| **Have you accepted an APS redundancy package in the last 12 months?** | | Yes | No | |
| **Please provide most recent/current employer details** | | | | |
| **Employer name:** | **Role:** | | | |
| **REFEREE DETAILS** | | | | |
| **Referee one name:** | **Relationship:** | **Email:** | **Phone:** | |
| **Referee two name:** | **Relationship:** | **Email:** | **Phone:** | |
| **ELIGIBILITY** | | | |
| **Are you an Australian Citizen?** | Yes | No | *If no please provide details* |
| **Have you ever been found in breach of the APS Code of Conduct?** | Yes | No | *If yes please provide details* |
| **Do you have or are you aware of any matters that may present a conflict of interest with APS employment?** | Yes | No | *If yes please provide details* |
| **APPLICANT CHECKLIST** | | | |
| Candidate application form complete | | | Yes |
| Current resume provided | | | Yes |
| Statement of claims complete | | | Yes |
| Do you require any reasonable adjustments for interview (online/onsite)? | | Yes | No | |
| If merit pooled do you consent to the release of your details to other APS agencies for potential employment (only upon request)? | | Yes | No |
| Where did you first find out about the vacancy | APS Jobs website | Seek website | Ethical Jobs website |
| NMHC website | Social media | Other |
| **APPLICANT STATEMENT** | | | |
| The above information and the information included in the attachments to my application, to the best of my knowledge, is true and correct. I understand that the Commission will collect and use information in order to assess my application for the role. This may include verifying my academic and/or professional qualifications with relevant institutions; and verifying information with nominated referees in relation to my work performance and conduct for the purpose of assessing my suitability to carry out the duties of the job I have applied for, and suitability to become an employee. | | | |
| **Signature:**  **🖎**  **Or, tick box if you are completing form electronically:** | | | |