APPLICATION FORM – Environmental Health Officer

Meander Valley Council
Working Together

Personal Details:
Surname:
Given Names:
Address:
Email:
Contact Number:

Referees: *I hereby give my consent for the below professional referees to be contacted.*
1. Name:
Position & Organisation:
Contact Number:
Professional Relationship:
2. Name:
Position & Organisation:
Contact Number:
Professional Relationship:

Application Checklist: *For your application to be considered, please ensure all items are answered Yes before submitting your application.*		
Application Form:	Yes ❑	No ❑
Cover Letter:	Yes ❑	No ❑
Resume:	Yes ❑	No ❑
Statement individually addressing each Selection Criteria:	Yes ❑	No ❑

Applications should be sent by email to: recruitment@mvc.tas.gov.au

Declaration by Applicant:
I hereby declare that I have prepared the information contained in this application and that it is true and accurate. I understand for my application to be considered I must provide all documents listed in the Application Checklist and confirm that my application contains all these documents.

_____	_____	_____
Signature	*Print Name*	*Date*