

APPLICATION FORM – Planning Support Officer

Please select the position that you are applying for:		
Full Time		
Part Time Preferred total hours per week and days/til	mes availa	able:
Personal Details:		
Surname:		
Given Names:		
Address:		
Email:		
Contact Number:		
Referees:		
I hereby give my consent for the below professional referees	to be cont	tacted.
1. Name:		
Position & Organisation:		
Contact Number:		
Professional Relationship:		
2. Name:		
Position & Organisation:		
Contact Number:		
Professional Relationship:		
Legal entitlement to work in Australia:		
	have the	annanciata work visa or have
To be eligible for employment, applicants must be a citizen, permanent residency status.	nave trie t	ippropriate work visa or nave
Australian/New Zealand Citizen / Permanent Resident?		Yes □ No □
If no, do you have a working visa:		Yes □ No □
Type of Visa: Visa Expi		
Application Checklist:		
For your application to be considered, please ensure all item	s are answ	vered 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



Dec	laratio	n by A	pplicant	:

 Signature	Print Name	 Date
☐ Council's Website	☐ Social Medi In/Other)	a (Facebook/Linked
	· · · · · ·	
□ Seek	Please specify: ☐ Other Job V	Vehsite
3eek	Please specify:	vebsite