

Aboriginal Corporation

ICN: 4691

MEMBER REGISTRATION – EMPLOYMENT & TRAINING

| PERSONAL INFORMATION | | | Date: | |
|--|-------------------------|-------------------------------|------------------|--------------------------------|
| Name | TENNE. | | | |
| Address | | Town: | | Postcode: |
| PO Box | | _ | | |
| Phone | | Personal USI No |). | 1 1 2 2 2 |
| Email: | | | | H 4 . 1 . 1 . 1 |
| Age: 13-19 □ 20-24 □ 25 | -29 □ 30-39 □ | 40-49 □ | 50-59 □ | 60-69 □ 70+ □ |
| Date of Birth: | _ Gender: | M□ F□ | | |
| What is your main language? Englis | sh□ Kriol □ | Other langu | ages □ | |
| Country of birth: | | A | ustralian Citize | n: Yes □ No □ PR □ |
| Do you identify as being of Aboriginal or To | rres Strait Islander de | scent? Ye | es 🗆 No 🗆 | |
| Access to transport? Good □ | Bad□ | None□ | | |
| Current residential status? Live inde | pendently □ Liv | e with parents/Gu | uardian 🗆 | No home □ |
| EMPLOYMENT INFORMATION | | | | The second of |
| Currently I am: Employed □ Not em | nployed Job See | eker Program 🗆 | 45.1 | |
| I would like: Full time employment I Improved employment I | | me employment [r change □ | □ Ca: | sual employment □ |
| Highest level of education completed: Year Certificate I □ Certificate | | | | Year 12 □ □ Degree or higher □ |
| ualification names: | | | | Year; |
| Are you registered with a CDP / Job Active | provider? | | Yes □ | No □ |
| If yes, name of the prov | ider? | | | |
| Do you have a disability or health issue that If yes, please specify: _ | | | | No □ |
| Do you have a resume? | Yes □ No □ | Needs updat | ing □ | |
| Do you have a current driver's license? | Yes □ No □ | Туре: | | |
| Do you have any other licences? | Yes □ No □ | Type: | | |
| How did you hear about us? | | | | |
| My Career Planning | | | | 1 |

CAREER INTERESTS

| ☐ LABOURER | ☐ COMMUNITY or PERSONAL SERVICES | | | |
|---|--|--|--|--|
| ☐ Aquaculture worker | ☐ Carer: child | | | |
| ☐ Cleaner domestic | ☐ Carer: aged, disabled, aide | | | |
| ☐ Cleaner commercial | ☐ Defence force, fire, ambulance officer | | | |
| ☐ Construction, paving | ☐ Health and welfare support worker | | | |
| ☐ Farm, forestry, agriculture, livestock | ☐ Hospitality worker, bar, waiter, cafe | | | |
| ☐ Fishing or deck hand | ☐ Indigenous health worker | | | |
| ☐ Food preparation assistant, packer | ☐ Massage, beauty therapist | | | |
| ☐ Freight furniture handler | | | | |
| ☐ Garden laborer | ☐ Police, prison, security officer | | | |
| ☐ Handyperson, fencing | ☐ Sports fitness worker, coach | | | |
| ☐ Housekeeper | ☐ Tourism guide, cultural tourism, gallery workers | | | |
| ☐ Mining laborer | □ SALES | | | |
| ☐ Shelf filler, trolleys at supermarket | ☐ Checkout operator, cashier, retail sales, other | | | |
| ☐ MACHINERY OPERATOR or DRIVER | ☐ TECHNICIAN or TRADES PERSON (qualified) | | | |
| ☐ Bus or truck driver | ☐ Agricultural technician | | | |
| ☐ Delivery driver | ☐ Architecture, engineering | | | |
| ☐ Mobile plant operator, earthmoving forklift | ☐ Bricklayer, carpenter, joiner D Chef, cook, butcher, baker | | | |
| ☐ Machine operator sewing, glass, concrete, textile | ☐ Electrician | | | |
| ☐ Stationary plant operator: crane, hoist, lift, drill | ☐ Fabrication, sheet metal | | | |
| ☐ Store person | ☐ Glazier, plasterer, tiler | | | |
| ☐ Taxi driver | ☐ Hairdresser | | | |
| ☐ CLERICAL or ADMINISTRATION | ☐ ICT support technician | | | |
| ☐ Accounts, bookkeeping | ☐ Motor mechanic | | | |
| ☐ Clerical | ☐ Panel beater, vehicle painter | | | |
| ☐ Courier, mail sorter, survey interviewer | ☐ Plumber | | | |
| ☐ HR clerk, librarian | ☐ PROFESSIONAL CAREER | | | |
| ☐ Information, librarian | E FROI ESSIONAL CARLER | | | |
| ☐ Personal assistant, secretaries | | | | |
| □ Receptionist | | | | |
| □ OTHER | Client Signature: | | | |
| Is there anything else you would like to tell us about yourself or do you have any career goal? | Date: | | | |
| | | | | |
| | | | | |

My Career Planning 2

WHAT ELSE YOU WOULD LIKE TO ACHIEVE?

| Are you interested in undertaking an apprenticeship or traineeship? | Yes □ No □ | Comments: |
|--|------------------|-----------|
| Are you interested in further education or training? | Yes □ No □ | Comments: |
| Are you interested in FIFO/DIDO? | Yes No | Comments: |
| Do you want to be contacted regarding services provided? | Yes □ No □ | Comments: |
| Can the DAC team send your resume to employers for potential employment? | Yes □ No □ | Comments: |
| Do you authorize the DAC team to obtain information from your Job Active Provide, or to send your resume to them or to a potential Employer? | Yes □ No □ | Comments: |
| Client Signature: | Date: | |
| Career Advisor: Date: | Recommendations: | |
| PRIORITY: Obtained copy of ID / MVDL / Certificates & Tickets or Qualifications | Yes □ No □ | Comments: |
| | | |

My Career Planning 3