

# History Trust of SA Application Cover Sheet

Please Note: This page must be completed and attached to the front of your application.

Section 1 – Applicant Details			
Advertised Role Title:			
Applicant Family name:		Applicant Given Name:	
Date of Birth (optional):			
Do you identify as an Aboriginal or Torres Strait Islander?			<input type="checkbox"/> Yes <input type="checkbox"/> No
ELIGIBILITY (select one)	<input type="checkbox"/> Australian citizen <input type="checkbox"/> Visa: _____ (Type of Visa)		<input type="checkbox"/> Australian residency
Have you accepted a Targeted Voluntary Separation Package (TVSP) from the South Australian Public Sector in the last 3 years?			<input type="checkbox"/> Yes <input type="checkbox"/> No
<b>Are you currently employed by the SA Government?</b>	<input type="checkbox"/> Yes <i>If yes go to section 2</i>	<input type="checkbox"/> No <i>If no, go to section 3</i>	
Section 2 – for existing SA Government Employees only			
Current Agency:		Current Role Title:	
Current appointment status:	<input type="checkbox"/> Ongoing	<input type="checkbox"/> Term/contract	<input type="checkbox"/> Other: _____
Section 3 – Applicant’s Declaration			
<b>I declare that:</b>			
1. Are you currently the subject of a formal underperformance process?		<input type="checkbox"/> Yes	<input type="checkbox"/> No
2. Are you currently the subject of an investigation/enquiry which may result in disciplinary action against you?		<input type="checkbox"/> Yes	<input type="checkbox"/> No
3. Have you been the subject of an investigation/enquiry resulting in disciplinary action against you?		<input type="checkbox"/> Yes	<input type="checkbox"/> No
<p>If you have indicated current or past involvement in any of these matters please provide relevant details on an attachment. The Department undertakes to maintain confidentiality as appropriate, subject to disclosures which have your consent, or are necessary for the processing of this application, or as otherwise required by law.</p> <p>I declare that to the best of my knowledge the information in this application is true and correct.</p> <p><b>Applicant’s signature:</b> _____ <b>Date:</b> _____ /</p>			
Section 4 – Referee Details			
REFeree NAMES AND CONTACT NUMBERS: Please note that one of these referees must generally be your current line manager. (If you wish, provide details of additional referees on an attachment)			
Referee One	Referee Two	Referee Three	
Name:	Name:	Name:	
Role Title:	Role Title:	Role Title:	
Relationship:	Relationship:	Relationship:	
Location:	Location:	Location:	
Phone:	Phone:	Phone:	