Vacancy Request Form

Fax to: NRA
Attention: Angela Paul
07 3251 3052

REFERRING BUSINESS INFORMATION

Referring Business Name:↓	Date form completed: / /
Contact Person Name and Position: ↓	Contact Person's direct phone number:
Street address:	Postal Address:

Suburb:	City:	State:	Post Code:
Business phone no.:	( )	Business Fax:	( )
Contact Person's email address:			

VACANCY DETAILS

Working hours:	❑ School Based	❑ Full time	❑ Part time
Days required to Work:	❑ Monday ❑ Tuesday ❑ Wednesday ❑ Thursday ❑ Friday ❑ Saturday ❑ Sunday		

Area of Employment:	Fashion ❑	Supermarkets ❑	Auto ❑	
Sporting ❑	Books, Music ❑	Department Store ❑	Other ❑	Specify below ↓
Baking ❑	Butchery ❑	Furniture / Homewares ❑		

Number of Positions:	Weekend work: ❑ Yes ❑ No	Overtime Required: ❑ Yes ❑ No
Qualification / Position title:		

MAIN DUTIES & RESPONSIBILITIES

1.
2.
3.
4.
5.
6.

PERSONAL QUALITIES / ATTRIBUTES DESIRED

BUSINESS /ENTERPRISE AGREEMENT

By signing this form I state I am / the business is committing to the provision for NRA SkillService to act exclusively on their behalf to fill the above position/s and utilise the complete services of NRA SkillService. I understand our obligations for engaging NRA SkillService and should we wish to withdraw our interest before a trainee / apprentice is engaged, agree to covering any costs associated with filling this vacancy up to the time of withdrawal.

Business Representative's signature↑	/ / *Date*
NRA SkillService Officer's signature↑	/ / *Date*