

Employment Experience Template

This form must be completed by you. Use a separate form for each period of employment you wish to claim.

1. Business details

Business name

Business address

State or province Postcode Country

Phone number

Business email

Business website

Position title

Are you currently employed here? Yes No

Date commenced (Day/Month/Year) Date completed (Day/Month/Year)

Employment Full time Part time Casual / Voluntary

Normal working hours per week Salary (Per annum)

2. Responsibilities of the role

Briefly describe the standard responsibilities of your role:

Describe the tasks and duties you were required to perform in your employment capacity, and provide key examples of when you demonstrated the required competencies of the role:

3. Applicant Declaration

Please tick each clause below and sign the declaration

I, (the applicant) declare that:

- I was employed for the period specified and in the role identified.
- I conducted the specified tasks and duties in the capacity of my employment.
- I have not misappropriated (copied and pasted) the description of my occupation responsibilities from any third party website, such as: ANZSCO.
- I understand that providing false or misleading information is an offence and all the information I have provided is true and correct.

Applicant
signature

Date

Day Month Year