

CASUAL APPLICATION FORM

This form is to be used to advise Human Resources of personal details when commencing casual employment with Namoi Cotton or any of the current joint ventures, namely Wathagar Ginning Company, and Australian Cotton Ginning Co. Any changes to these details are to be provided to Human Resources at the time they occur.

EMPLOYEE TO COM	PLETE:							
SURNAME:			GIVEN NAMES:					
Preferred Name:			GENDER:	М	F	DOB:		
PRESENT ADDRESS: (The address provided here s	uring season)		P/Con	DE:				
HOME ADDRESS: (The address provided here should be a permanent address for payment summaries)						P/CODE:		
HOME PHONE NO:):				
E-MAIL ADDRESS (PERSONA	L):							
CONTACT IN CASE	OF EMERG	ENCY:						
NAME: ADDRESS: PHONE NUMBER: RELATIONSHIP:								
EMPLOYMENT HIST	ORY: (Ple	ease attach resum	e and/or references	s)				
HAVE YOU PREVIOUSLY WO IF "YES" — SPECIFY WHICH IF YOU HAVE CHANGED YOU FAMILY NAME:	SITE UR NAME SINC	CE YOU LAST WOR	RKED FOR NAMOI	Cotton,	PLEASE S	YES	No No R PREVIOUS	
PREVIOUS EMPLOYERS (NAME AND PHONE NUMBER)		DETAILS OF DUTIES PERFORMED		EMPLOYMENT PERIOD			REASON FOR LEAVING	
EDUCATION/TRAIN	No Histo	ARV.						
		789101112 eted)	TERTIARY:					
(Circle Year Comple Qualifications		DETAILS AND NUMBER (PLEASE ATTACH PHOTOCOPIES)				IF YOU DON'T HAVE A TICKET — DO YOU HAVE EXPERIENCE IN THIS AREA?		
ANY TRADE	Yes / No	_			YES	s / No		
F/END LOADER	YES / NO	_	YES / NO					
DRIVERS LICENCE	YES / No		YES/NO					
FORKLIFT	YES / No					s / No		
CRANE	Yes/No					s / No		

QUESTION ONE	
	ON GIN OR COTTON WAREHOUSE BEFORE?
YES Go to Q2	No Go to Q3
QUESTION TWO	
STATE LOCATION/S:	Position/s Held:
Duties Performed:	
YEAR OF SEASON/S WORKED:	
QUESTION THREE	
DO YOU HAVE YOUR OWN TRAN	SPORT? YES NO NO
QUESTION FOUR	
ARE YOU LEGALLY PERMITTED	TO WORK IN AUSTRALIA? YES NO NO
QUESTION FIVE	
Would you prefer to work	■ DAYSHIFT NIGHTSHIFT EITHER
QUESTION SIX	
WHAT IS YOUR PREFERED SITE	LOCATION TO WORK? (PLEASE NUMBER BOXES BELOW)
NSW	
BOGGABRI GIN	WATHAGAR GIN (WGC) WEE WAA WAREHOUSE
ASHLEY GIN	MUNGINDI GIN MERAH NORTH GIN (WEE WAA)
WARREN WAREHOUSE MOOMIN GIN	TRANGIE GIN YARRAMAN GIN (WEE WAA) HILLSTON GIN (ACGC)
	TILLSTON GIN (ACGC)
<u>QL</u> D	
GOONDIWINDI GIN	GOONDIWINDI WAREHOUSE
HEALTH AND SAFETY I	NEODMATION
_	NFORMATION:
QUESTION ONE	
PI FASE TICK IF YOU HAVE EVER	SUFFERED ANY OF THE FOLLOWING?
BLACKOUTS	Bone Disorders Blindness
SKIN RASHES	HERNIA D. D. C.
DIABETES HEADING LOGG	BACK INJURY
HEARING LOSS	EPILEPSY ACTUMA
L ALLERGIES (if you suffer from asthmaly	ASTHMA OU MUST SUBMIT AN ASTHMA MANAGEMENT PLAN, SIGNED BY YOUR TREATING DOCTOR)
	20 100 MILATING MANAGEMENT I EAR, SIGNED DT TOOK INCATING DOCTOR)
QUESTION TWO - (THIS QUESTION THREE)	ON IS NOT APPLICABLE FOR EMPLOYMENT AT ANY NAMOI COTTON SITE IN QUEENSLAND — GO TO
HAVE YOU EVER APPLIED FOR V	VORKER'S COMPENSATION FOR AN INDUSTRIAL ILLNESS OR INJURY?
YES Please provide de	tails) No 🗆
QUESTION THREE	
DO YOU AGREE TO ADHERE TO	ALL SAFETY REGULATIONS INCLUDING THE WEARING OF NECESSARY PROTECTIVE
EQUIPMENT?	
YES NO	
Page 2 of 3	

DECLARATION: (please read carefully before signing)

- ✓ I agree to work at any location & on any shift as required.
- I agree to observe & adhere to all safety regulations, including the wearing of necessary protective equipment as instructed by authorised Namoi Cotton representatives.
- ✓ I understand that a pre-condition to the commencement of employment and/or a pre-condition to continued employment with Namoi Cotton is that as an employee, I satisfactorily pass any drug and alcohol policy requirements established from time to time by Namoi Cotton. Namoi Cotton and the Employee acknowledge Namoi Cotton has a zero tolerance for drugs and alcohol for Namoi Cotton sites. In the event the Employee fails to meet the requirements of Namoi Cotton's drug and alcohol policy, then Namoi Cotton may not offer employment or terminate the Employee. The failure by the Employee to take a drug or alcohol test when requested to do so by the Employee is a breach of Namoi Cotton's condition of employment.
- ✓ I may be subject to a drug test prior to commencement of employment, & both random drug & alcohol testing throughout the season, where any non-negative results may lead to my suspension &/or termination.
- ✓ I understand that I will be subject to a range of health tests, which may include hearing, lung function & physical capabilities. I also understand that should any of these tests show that I am unable to perform all aspects of the job satisfactorily as per Namoi Cotton's requirements, ongoing employment may not be offered.
- I acknowledge that subject to satisfactory work performance, my employment will terminate upon being given notice by the site/department manager.
- I acknowledge a requirement to provide my own steel-capped safety boots, for which (on presentation of a receipt) I will be reimbursed up to \$80 after three weeks of employment.
- ✓ I understand the requirement to provide safety boots & my asthma management plan (if required) at induction.
- I certify that the above information is true & correct & that my employment may be terminated should any particulars be found to be false.

SIGNATURE:	DATE:	
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COLLECTION STATEMENT:

- 1. The collection of information provided on this application form and in the resume/curriculum vitae (provided directly by you), will be utilised throughout Namoi Cotton Co-Operative Ltd's recruitment process to ascertain your suitability for employment with the company.
- 2. Only information deemed necessary has been collected on this form.
- 3. Should your application be unsuccessful, at your request you are able to view all documentation (excluding any collected as in Point 2 of the Agreement Section below) associated with the recruitment process ie interview records, testing data etc.
- 4. Namoi Cotton Co-Operative Ltd will endeavour to ensure that all personal information collected will be maintained as accurately as possible and stored in a secure environment.
- Information may only be disclosed for the primary purpose of collection. Exceptions include: any related secondary purpose; with your personal consent; health & emergency situations; suspected fraud or unlawful activity; required as authorised by law or as part of law enforcement.

AGREEMENT:

- 1. I understand the content of the statement above.
- 2. I provide permission for your company to contact my nominated referees and in providing such permission agree that any opinion or information provided to your company is confidential between your company and the referee.
- I understand that failure to provide information as required as part of the recruitment process will mean my application will not proceed.
- 4. I understand that failure to sign this consent documentation will mean my application will not proceed.

SIGNATURE:	DATE:
OPTIONAL:	
	ion, I agree to allow my records to be maintained by Namoi Cotton Co-Operative Ltd for a period of the date of this form, for possible selection in future vacancies with the company. After this time all estroyed.
YES No	
SIGNATURE:	Date: