**APPLICATION FORM**

**Please complete and submit this form electronically - handwritten forms will not be accepted.**

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|   | **1. Personal Particulars** |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
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|   | Title: |   |   | Surname: |   |   |   |   |   |   | Given names: |   |   |   |   | Gender: |   |   |
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|   | Postal address: |   |   |   |
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|   | City or Town: |   |   |   | Postcode: |   |   |   | State or Province: |   |   | Country: |   |   |   |   |
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|   | Mobile number (Inc area code): |   |   | Home number (Inc area code): |   | Date of birth: |   |   |   |   |   |
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|   | **Language proficiency and level (if tested)** |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
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|   | **2. Position Applying For** |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
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|   | How did you hear about the vacancy: |  Choose an item. |   | Other please specify: |   |   |
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|   | **3. One page essay/pitch** | (Limit of 1000 words) |   |   |   |   |   |   |   |   |   |   |   |
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|  | *Please provide a one page essay telling us why you are the right person for the job. We want to know why you want to work at the Australian Embassy Indonesia, why you are interested in the role and how your skills, knowledge, experience and qualifications are applicable to the role.* |  |
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|  |[ ]  I have attached my current CV of no more than two A4 pages. |  |  |  |  |  |  |  |  |  |  |  |

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|   | **4. Applicant Statement** |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
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|  | *The information in this application, to the best of my knowledge, is true and correct. I consent to the Embassy collecting and using information, and to relevant employers disclosing information, in relation to my work performance and conduct for the purpose of assessing my suitability to carry out the duties of the role I have applied for, and suitability to become an Embassy employee. I understand that misstatements or omissions in the selection process may result in a failure to secure a position or immediate discharge if they are discovered.* |  |
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|   | I, |   | have read and understood the Applicant Statement |   | Yes |  [ ]  |   | No | [ ]   |   |
|   |   | Type your name |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
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|   | **5. Referees** |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
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|   | **Referee 1** |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
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|   | Referee's name: |   |   |   |
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|   | Contact No: |   |   | Email: |   |   |
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|   | **Referee 2** |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
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