Traineeship Transition to Employment Referral Service Form

## Section 1 (completed by applicant)

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| **Candidate details** |
| **First name** |  | **Middle name** |  |
| **Last name** |  |
| **Date of birth** | Date field |
| **Gender** | [ ]  Man or male [ ]  Woman or female [ ]  Non-binary [ ]  [I/They] use a different term (please specify) Text field[ ]  Prefer not to answer  |
| **Residential address** |  |
|  |
| **Home number** |  | **Mobile** |  |
| **Personal email** |  |
| **Traineeship details** |
| **Host agency** |  |
| **Traineeship qualification** |  |
| **Date commenced** | Date field | Date completed | Date field |
| **Do you identify as being (optional)** | [ ]  Aboriginal or Torres Strait Islander [ ]  A person with disability[ ]  Culturally and linguistically diverse  Please state your first language: Text field |
| **Submission checklist** |
| **Check that you have included the following with your application** |
| [ ]  | Traineeship Transition to Employment Referral Service form. |
| [ ]  | Certificate II, III or IV in Government as proof of traineeship completion. |
| **I acknowledge the following conditions by submitting my application** |
| [ ]  | There is no guarantee of employment as a result of this application. |
| [ ]  | My details may be provided to a public sector agency so I can be considered for a Level 1 position. |
| [ ]  | I can request to have my registration removed at any time. |
| [ ]  | I will be deregistered from the program 12 months after being registered.  |
| [ ]  | I will be automatically deregistered from the program if I am permanently employed in a public sector agency. |

## Section 2 (completed by agency)

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| **Agency endorsement**  |
| **Agency** |  |
| **Applicant name** |  |
| **Trainee supervisor**  |
| **Full name** |  |
| **Position title** |  |
| **Email address** |  |
| **Contact phone** |  |
| **The trainee is considered suitable for a Level 1 position** |
| [ ]  Yes  | [ ]  No |
| Comments (optional) |
| **Human resources manager** |
| **Full name** |  |
| **Email address** |  |
| **Contact phone** |  |
| **Agency confirmation the following statements are applicable** |
| [ ]  Yes  | The agency would employ the trainee in a Level 1 position however there is no current vacancy. |
| [ ]  Yes  | The agency acknowledges that should a ‘request to fill a vacancy’ be forwarded to the Traineeship Transition to Employment Service within the next 12 months, the candidate may be referred to that position. |
| **Signature(electronic accepted)** |  | **Date** | Date field |

## Section 3 (completed by Public Sector Commission)

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| **Office use only** |
| [ ]  | Candidate has been registered in the program |
| [ ]  | Certificate II, III or IV in Government (proof of traineeship completion) |
| **Agency endorsement** |
| [ ]  | Trainee is considered suitable for a Level 1 position |
| [ ]  | Signed off by HR Manager |

Email completed form to youth@psc.wa.gov.au