Policy:
It is the policy of Mechanised Logging Pty Ltd to employ and promote the person best suited for the position. Initial employment and future promotion will be based purely on the merit principle.

It is the policy of Mechanised Logging Pty Ltd to engage employees:
- whose health status allows them to perform their work safely.
- who are not suffering from any injury, illness or condition that may be aggravated by their work.
- who are not suffering from any injury, illness or condition which may place themselves or other workers at risk.
- who are not suffering from any injury, illness or condition which would inhibit their capacity to fulfil the requirements of their position.

Procedure:
To ensure that this policy is implemented the following procedures are to be followed:-

- An Employment Application form will be completed to gauge personnel’s initial skill level and indicate suitability to position.

- An interview will be held for suitable applicant’s to obtain and evaluate more detailed information about each applicant.

- Pre-employment medical is required, including drug and alcohol testing, to ensure the applicant is fit for work. All costs are paid by the company.

- Mechanised Logging Pty Ltd will ensure all personnel are proficient in the job skills of the position that they are employed to do. This involves a thorough appraisal of new personnel’s skills, supervision, ongoing coaching and training, and gaining certification as each standard is reached.

- Mechanised Logging Pty Ltd will ensure that the successful applicant is fully inducted and trained in Health and Safety Procedures, and has a full understanding of all working procedures, safety systems and emergency procedure.

- This company also ensures that personnel are aware of workplace hazards, and their responsibility of personal and team safety in the workplace. This is done through the process of Induction training and involves ongoing guidance and education in the areas of health and safety.

- The Company require all personnel to be fully trained, certified and attend an annual refresher course on First Aid Training. This training is arranged by the company, and the minimum level required is Workplace First Aid level 2.
Mechanised Logging Pty Ltd

INTEREST OF EMPLOYMENT / APPLICATION FORM

A full medical assessment and drug & alcohol screen is required for all employees.

PAGE 1 - Confidential

APPLICANT’S DETAILS

Surname: __________________________________________
Given Names: ______________________________________
Address: ___________________________________________________________________________________
                                                                                          Postcode: ______

Date of Birth: ____________________________
Telephone: __________________________ (Home)    __________________________ (mobile)
E-mail: ____________________________
Particulars of Position applied for: ____________________________________________________________

EDUCATION

What school did you last attend ? ______________________________________________________________
In what year did you leave ? ____________________________________________________________
What was your highest qualification ? ______________________________________________________
Have you undertaken any studies since leaving school ? _________________________________
Please provide details:
__________________________________________________________________________________
__________________________________________________________________________________

PREVIOUS OR CURRENT EMPLOYMENT

Name of Employer: ____________________________
Period of Employment: ___________________________________________________________________
Reason for Leaving: _____________________________________________________________________
Position held: ____________________________
Duties/Responsibilities: __________________________________________________________________

Name of Employer: ____________________________
Period of Employment: ___________________________________________________________________
Reason for Leaving: _____________________________________________________________________
Position held: ____________________________
Duties/Responsibilities: __________________________________________________________________
**TRAINING**

Have you attended any training courses or been given ‘on the job’ training in any specific areas?  

Yes______  No______

If yes, please provide details:

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<th>YEAR</th>
<th>TRAINING</th>
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**QUALIFICATIONS**

Do you have any tertiary, trade or industry related qualifications?  
Yes______  No_______

If Yes, please provide details:

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**LICENCES**

Do you hold a current drivers licence:  
Yes____  Expiry date _____________

Do you have any endorsements on your driver’s licence?

| Light truck | Yes___  No___ |
| Heavy truck | Yes___  No___ |
| Light articulated | Yes___  No___ |
| Heavy articulated | Yes___  No___ |
| Motorcycle | Yes___  No___ |

Do you have any specific logging industry certificates?

| Forest Industries Certificate Level 1, 2 or 3 | Yes___  No___  Which level? _____ |
| Excavator Harvesting | Yes___  No___ |
| Log Skidder | Yes___  No___ |
| Mechanical Harvesting / feller | Yes___  No___ |
| Mechanical Harvesting / Processor | Yes___  No___ |
| Mechanical Harvesting / forwarder | Yes___  No___ |
| Forest Practices Code - level 1 | Yes___  No___ |
| Fire Weather Evaluation | Yes___  No___ |
| Fire Safety | Yes___  No___ |
| Chainsaw Certificate | Yes___  No___ |

Do you hold a current First Aid Certificate ?  
Yes___  No___

Accredited by which company?  
________________________________________  Which level? ________

Date Valid to?

____________________
PREVIOUS WORKERS COMPENSATION CLAIMS

Have you ever made a claim for worker’s compensation or received a type of injury that may impact on your ability to carry out the duties of the position you are applying for:

Yes____ No_____

If Yes, please specify:

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OVERTIME AND WEEKEND WORK

Are you prepared to work overtime including work on Saturday’s if required? Yes_____ No_____

Are you prepared to comply with all instructions and wear personal protective equipment provided by the employer in respect of matters relating to Mechanised Logging Pty Ltd Workplace Health and Safety guidelines? Yes_____ No_____ 

SPORTING ACTIVITIES

List regular and occasional sporting activities:

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

REFEREES

Please provide the names, addresses and telephone numbers of two referees:-

Name of Referee:_________________________________________________________
Address:________________________________________________________________
Telephone Number:________________________________________________________________
Relationship to referee:________________________________________________________________

Name of Referee:_________________________________________________________
Address:________________________________________________________________
Telephone Number:________________________________________________________________
Relationship to referee:________________________________________________________________
ANY ADDITIONAL INFORMATION TO SUPPORT YOUR APPLICATION:

Include details of any other skills, knowledge or expertise (you may wish to include why you would like a position and career in the forestry industry):

__________________________________________________________________________________________________
__________________________________________________________________________________________________
__________________________________________________________________________________________________
__________________________________________________________________________________________________
__________________________________________________________________________________________________
__________________________________________________________________________________________________
__________________________________________________________________________________________________
__________________________________________________________________________________________________
__________________________________________________________________________________________________

IN CASE OF EMERGENCY

Next of Kin - Contact

Name________________________________________ Telephone ________________________________

Address____________________________________ Relationship _____________________________

Is the employer authorised to contact the above person in case of emergency? Yes_______ No________

Applicants Signature: ______________________________ Date: ______________________________

If under 18, please have your parent or guardian sign here:-

Parent/Guardian Signature: __________________________ Date: ______________________________