

TOMAX

SECURITY INDUSTRIES

Employment Application

PO Box 376
Wollongong NSW 2520
Phone 02 4225 2966
Fax 02 4225 2988
Email: tomax.security@bigpond.com

EMPLOYEE INFORMATION

Name: _____ Date of Birth: _____

Address: _____

Suburb: _____ Post Code: _____

Phone Number: (H) _____ (M) _____

Security Licence: _____ Class: _____

Expiry Date: _____

Drivers Licence No: _____ Class: _____

Expiry Date: _____

Senior First Aid- Date of Expiry: _____

Responsible Service of Alcohol – Certificate: Yes / No