



Shire of Three Springs

Position Description

Date: July 2022

1. Position Identification

Title:	Casual Cleaner				
Position Number:	219	Level:	LEVEL 1	Agreement/Award:	Municipal Employees (WA) Award 2021
Department:	Works				
Section:	Cleaning				
Location:	Three Springs, Western Australia				
Reports to:	Manager of Works and Services Supervisor of Parks and Facilities				2. Report
Internal relationships:	Chief Executive Officer / Deputy Chief Executive Officer All Staff				
External relationships:	Key Stakeholders Community members				
No of Direct Reports:	0				

3. Value Statement

Embrace and promote the values of integrity, accountability, respect and innovation.

- A commitment to work together and respect each other
- To be a community that is fair minded, approachable, tolerant and responsive
- To have a regional focus; and
- To be an innovative and forward thinking community

4. Role Purpose

To carry out Cleaning of Council's Facilities such as the Community Hall, Offices, Depot, Pavilion and Public amenities, as directed by the Supervisor of Parks and Facilities.

5. Key Objectives

- Carry out the cleaning of Council's Facilities as directed by the Manager of Works and Services or the Supervisor of Parks and Facilities in a safe and efficient manner according to the Shires OHS policies.
- To contribute positively and productively to a harmonious workplace.



6. Key Responsibilities

- To maintain the cleanliness of Council's facilities as required.
- Participate, contribute and demonstrate personal commitment to safe practice and environmental awareness that is compliant with Duty of Care requirements and relevant regulations and guidance notes.

7. Other Requirements

Adheres to the Code of Conduct and other workplace policies and procedures and behaves in an honest, professional and ethical way.

8. Qualifications and Work Experience

Essential

- Demonstrated experience.
- Ability to demonstrate and support the values of the Shire of Three Springs.
- Hold a current national "C" class driver's licence.

9. Authorisation Process

Authorisation Process			
Title:	Print Name:	Signature:	Date:
Chief Executive Officer	Keith Woodward		
Employee			





APPLICATION FOR

Thank you for your interest in this position with the Shire of Three Springs. Please complete the following questions and attach with your application.

VACANCY DETAILS			
Position Title:			
PERSONAL DETAILS			
Surname:		Title:	<input type="checkbox"/> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Ms <input type="checkbox"/> Miss
Given Names:		Date of Birth:	
Address:			
Suburb:		Postcode:	
Email:			
Daytime Contact No:		Mobile:	
Are you an Australian Citizen or permanent resident of Australia?		<input type="checkbox"/> Yes <input type="checkbox"/> No	
If no, do you currently hold a Visa allowing you to work in Australia? (If yes, please attach a copy.)		<input type="checkbox"/> Yes <input type="checkbox"/> No	
Do you hold a current Motor Vehicle Driver's Licence?		<input type="checkbox"/> Yes <input type="checkbox"/> No	
<i>If yes, please provide details:</i>			
State:	Class(es):	Number:	Expiry:
Do you hold a current (Less than 3 Months old):			
<input type="checkbox"/> National Police Clearance <input type="checkbox"/> Working with Children Check OR <input type="checkbox"/> willing to obtain clearance/s.			
RECRUITMENT			
How did you first become aware of this vacancy?			
<input type="checkbox"/> Shire of Three Springs website			<input type="checkbox"/> Other website
<input type="checkbox"/> Local Government Jobs website			<input type="checkbox"/> Local newspaper
<input type="checkbox"/> WA Govt Jobs website			<input type="checkbox"/> West Australian
<input type="checkbox"/> Word of mouth			<input type="checkbox"/> Other
ATTACHMENTS			
Please ensure you have attached all the required documents (see <i>Information for Prospective Applicants</i> for details).			
<input type="checkbox"/> Cover Letter			<input type="checkbox"/> Resume / Curriculum Vitae
<input type="checkbox"/> Referees (2 contactable work referees, preferably Supervisors or Managers)			
<input type="checkbox"/> Copies of relevant qualifications			
AVAILABILITY			
How soon would you be available to commence work?			
<i>(If currently employed, what is the minimum period of notice required?)</i>			

Declarations

The following declarations are NOT a barrier to being considered for employment, but will assist us to take due care in assessing placement should you be the successful applicant.

HEALTH			
To the best of your knowledge, do you have a medical condition, injury or disability that would impact your ability to undertake the duties of the position you applied for? <input type="checkbox"/> Yes <input type="checkbox"/> No			
If “yes”, please provide details of condition:			
WORKER’S COMPENSATION CLAIM			
Have you ever made a Worker’s Compensation Claim? <input type="checkbox"/> Yes <input type="checkbox"/> No			
If “yes”, please describe claim details (e.g. year of injury, what type of injury, company worked for, period of time off work, etc.):			
Year of Injury	Type of Injury	Name of Company	Period of time off work
Are any claims still current? <input type="checkbox"/> Yes <input type="checkbox"/> No			
If “yes”, please provide details of current claims:			
CRIMINAL			
Have you ever been convicted of any offence in any court, or are you currently subject to any charges pending before court, or the subject of an investigation before a tribunal? <i>(You do not need to give details of any conviction which you have had declared spent under the “Spent Convictions Act 1988”.)</i> <input type="checkbox"/> Yes <input type="checkbox"/> No			
If “yes”, please provide details:			
APPLICANT			
I declare that all the above statements and attached supporting information are true in all respects and consent that this information will be stored and used for the purposes of assessing suitability for employment. I understand that in providing referees I consent to them being contacted. I acknowledge that any statement which is found to be false or deliberately misleading will make me, if employed, liable for dismissal. <i>(If submitting a hard copy, please sign and date. If emailing, please enter your name and date, we will consider this consent as described above.)</i>			
Applicant’s signature:		Date:	