CMV TRUCK & BUS

2019 AUTOMOTIVE APPRENTICESHIP

APPLICATION FORM (Confidential)

Personal details

Name:	
Address:	
Postcode:	
Phone: Home: Mobile:	
Date of Birth:	
Application for: Derrimut Mack/UD/Volvo Dealership ☐ Clayton Mack/Volvo Dealership ☐ Dandenong Mack/UD/Volvo Dealership ☐ Traralgon Mack/UD/Volvo Dealership ☐ Albury/Mack/UD/Volvo Dealership ☐	
Email Address:	

Please attach a photograph of yourself here

Have you applied for the CMV Automotive Apprenticeship previously? YES ☐ NO ☐

If yes, when? Month _____ Year _____

Highest level of secondary education achieved (i.e. Year 10, 11 or 12)

_____

What year did you undertake the above secondary education? (i.e. 2009)

_____

Where did you carry out the above secondary education? (i.e. Sandringham Secondary College)

_____

Subjects completed or commenced at highest level of secondary education (i.e. Year 10, 11 or 12)

Subject	Grade (if known)

Any other relevant courses

Year(s)	Course	Grade (if applicable)

Employment history (including part-time, unpaid or community involvement)

Year(s)	Employer	Duties	Duration

Current hobbies, recreation

My reasons for applying

In the space provided below, please indicate why we should select you for this Apprenticeship. Please provide a concise answer that does not go beyond the allotted space.

PLEASE ENSURE TO INCLUDE YOUR:-

1. **Resume**
2. **Certificates**
3. **School Reports**
4. **Any other relevant information**

Complete and send this form and any relevant attachments to:-

Mrs. Lesley Wickham
Secretary to the Senior General Manager
CMV Truck and Bus Pty. Ltd.
392 Boundary Road
DERRIMUT, Vic. 3026
Email: lwickham@cmv.com.au