TULLY SUGAR LIMITED

ABN 92 011 030 256



APPRENTICESHIP APPLICATION FORM

To be filled out in your own handwriting clearly and staple to the front of your school results with any other attachments.

For your application to be considered school results must be attached to this application form.

ame: (Surname)		-	
(Given Nam	e/s)	-	
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Health & Wellbeing: (Please list anything that may restrict you from undertaking and completing an Apprenticeship: medical condition, health restriction, colour blindness). Tully Sugar will consider this information that may affect some Apprenticeships and industry requirements.
What do you like to do outside of school/work e.g. hobbies/ sports:
Licences: (Car, Truck, high risk work licence, Etc.)
Work experience, part time work, etc.:
Summary: (Please give a summary of your reasons for wishing to do an apprenticeship with Tully Sugar Limited)
Where did you hear about this Opportunity:
I hereby declare the details listed are true and correct.
Signature of Applicant
Applications may be emailed to recruiting@tsl.com.au

PO BOX 441 TULLY QLD 4854 AUSTRALIA **T**: 07 4068 4776

Reminder: For your application to be considered attach school results to date