

APPLICATION FORM

FULL NAME

CONTACT NUMBER

ADDRESS

POSITION SOUGHT

QUALIFICATIONS

DETAILS OF GEOTECHNICAL OR CONSTRUCTION MATERIALS TESTING EXPERIENCE

DO YOU HOLD A SOIL DENSITY AND MOISTURE GAUGE USERS LICENCE? YES NO

If yes, date of issue and state in which it was issued

ARE YOU AN ACCREDITED NATA SIGNATORY FOR CONSTRUCTION MATERIALS TESTING? YES NO

If yes, list the tests you are accredited for and the dates you received accreditation

ARE YOU WILLING TO RELOCATE TO A REGIONAL AREA FOR THE RIGHT OPPORTUNITY? YES NO

ARE YOU WILLING TO WORK AT A SITE LABORATORY IN A REMOTE LOCATION? YES NO

DO YOU HAVE A MANUAL DRIVER'S LICENCE? YES NO

DO YOU HAVE A WHITE/BLUE CARD (CONSTRUCTION INDUSTRY SAFETY INDUCTION)? YES NO

ARE YOU WILLING TO UNDERTAKE A MEDICAL ASSESSMENT INCLUDING A FITNESS TEST AND A DRUG AND ALCOHOL SCREEN? YES NO

WHAT IS YOUR EXPECTED SALARY/WAGE?

WHAT IS YOUR CURRENT EMPLOYMENT NOTICE PERIOD, IF YOU WERE OFFERED A ROLE WITH SQS?

RESUME ATTACHED YES NO

COVER LETTER ATTACHED optional YES NO