



# WORK HISTORY DECLARATION INDIVIDUALS



## HOW TO COMPLETE THIS FORM

- Complete details in Section 1 (*List multiple employers if necessary*)
- Complete all details in Section 2.
- Provide the sites that demonstrate you were directly employed in the construction industry in Western Australia for a minimum of six months, within 12 months prior to the date of course commencement.
- Read and sign the declaration.
- Return to the Construction Training Fund or Training Provider.

### SECTION 1

Your Name	Your Email Address	Your Phone Number
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### SECTION 2

Employer Name	Office Number	Job type				Your Job Role (e.g. rigger / bricklayer)	Job Description (e.g. house, office, warehouse, power plant)	Job Address	Job Location / Suburb	Job Start Date	Job End Date
		BUILD	FABRICATE	INSTALL	MAINTAIN						
		BUILD	FABRICATE	INSTALL	MAINTAIN						
		BUILD	FABRICATE	INSTALL	MAINTAIN						
		BUILD	FABRICATE	INSTALL	MAINTAIN						
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		BUILD	FABRICATE	INSTALL	MAINTAIN						

Please return this form to the Construction Training Fund by:  
 Post: PO Box 746, Wembley WA 6913  
 Fax: 9244 0199  
 Or

I declare the information given in this form is truthful, accurate and complete. I am aware that giving false or misleading information may result in legal action and by signing this form I am aware that the Fund may contact my nominated employer/s. I understand that the final determination regarding eligibility rests with the Training Fund.

Signature \_\_\_\_\_

Date \_\_\_\_\_

#### USE AND DISCLOSURE OF PERSONAL INFORMATION

Any personal information we collect on this form will only be used or disclosed for the primary purpose from which it was collected.

In some limited circumstances we may also need to use or disclose personal information for other specific purposes, for example where required to do so by law, for example pursuant to the Freedom of Information Act 1992 or in response to a subpoena.