# Graduate Program application cover sheet

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **How did you find out about this opportunity?** | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |
| **Part A** | | | | **Personal details** | | | | | | | | | | | | | | | | | | | | | | | | |
| **Given name:** | | | | |  | | | | | | | | | **Surname:** | | | |  | | | | | | | | | | |
| **Business hours phone number:** | | | | |  | | | | | | | | | **After hours contact number:** | | | |  | | | | | | | | | | |
| **Email address:** | | | | | | |  | | | | | | | | **Gender:**   Female  Male  (optional)  Non-binary  Other | | | | | | | | | | | | | |
| **Residential address:** | | | | | | |  | | | | | | | |  | | | | | | | | | | | |  | |
| **State:** | | | | | | | Choose an item. | | | | | | | | **Postcode:** | | | |  | | | | | | | | | |
| **Part B** | | | **Workplace Diversity Details** | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Do you wish to identify yourself as a member of the following groups?** | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Aboriginal and/or Torres Strait Islander:** | | | | | | | | | | | | | | | | | | | |  | | | Yes |  | | No | | |
| **Person from non-English speaking background:** | | | | | | | | | | | | | | | | | | | |  | | | Yes |  | | No | | |
| **Person with a disability:** | | | | | | | | | | | | | | | | | | | |  | | | Yes |  | | No | | |
| **If selected for interview, will you require any special requirements/ arrangements to be made?** | | | | | | | | | | | | | | | | | | | |  | | | Yes |  | | No | | |
| If yes, please advise: | | | | | | | | | |  | | | | | | | | | | | | | | | | | | |
| **Part C** | | **Education details (of your highest qualification attained)** | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Qualification type** | | | | | | | | | |  | | | | | | | | | | | | | | | | | | |
| **Name of qualification** | | | | | | | | | |  | | | | | | | | | | | | | | | | | | |
| **Main field of study/ major** | | | | | | | | | |  | | | | | | | | | | | | | | | | | | |
| **Name of institution** | | | | | | | | | |  | | | | | | | | | | | | | | | | | | |
| **Year completed** | | | | | | | | | |  | | | | | | | | | | | | | | | | | | |
| **If you have any other qualifications you have completed, or if you are currently studying, please provide details:** | | | | | | | | | | | | | | | |  | | | | | | | | | | | | |
| **Part D** | | **Current / most recent employment details** | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Are you currently participating (or about to participate) in a 2021 or 2022 graduate program with an Australian Public Service department or agency?** | | | | | | | | | | | | | | | | | | | | |  | Yes | | |  | | | No |
| **Do you have support from your department or agency for your application? (Please note that no formal documentation is required)** | | | | | | | | | | | | | | | | | | | | |  | Yes | | |  | | | No |
| **Current department / agency:** | | | | | | | | | | |  | | | | | | | | | | | | | | | | | |
| **Current classification (level):** | | | | | | | | | | | Choose an item. | | | | | | **AGS Number:** | | | |  | | | | | | | |
| **Do you hold a Baseline security clearance?** | | | | | | | | | | | | | | | | | | | | |  | Yes | | |  | | | No |
| **If no, have you obtained support from your department or agency to sponsor your Baseline security clearance?** (You must obtain this support before lodging your application.) | | | | | | | | | | | | | | | | | | | | |  | Yes | | |  | | | No |
| **Please provide the following details for your Graduate Program Coordinator:** | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Name:** | | | | | | | |  | | | | | | | | | | | | | | | | | | | | |
| **Email address:** | | | | | | | |  | | | | | | | | | | | | | | | | | | | | |
| **Phone number:** | | | | | | | |  | | | | | | | | | | | | | | | | | | | | |
| **Part E** | | **Referees** | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Please provide contact details of two referees to support your claims for this position. Your nominated referees should be a current and/or recent supervisor or manager. | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Referee 1** | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Name:** | | | | | | | |  | | | | | | | | | | | | | | | | | | | | |
| **Organisation:** | | | | | | | |  | | | | | | | | | | | | | | | | | | | | |
| **Relationship:** | | | | | | | |  | | | | | | | | | | | | | | | | | | | | |
| **Phone number:** | | | | | | | |  | | | | | | | | | | | | | | | | | | | | |
| **Email address:** | | | | | | | |  | | | | | | | | | | | | | | | | | | | | |
| **Commenced working with referee:** | | | | | | | | | | | | | DD/MM/YYYY | | | | | | | | | | | | | | | |
| **Finished working with referee:** | | | | | | | | | | | | | DD/MM/YYYY | | | | | | | | | | | | | | | |
| **Referee 2** | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Name:** | | | | | | | | |  | | | | | | | | | | | | | | | | | | | |
| **Organisation:** | | | | | | | | |  | | | | | | | | | | | | | | | | | | | |
| **Relationship:** | | | | | | | | |  | | | | | | | | | | | | | | | | | | | |
| **Phone number:** | | | | | | | | |  | | | | | | | | | | | | | | | | | | | |
| **Email address:** | | | | | | | | |  | | | | | | | | | | | | | | | | | | | |
| **Commenced working with referee:** | | | | | | | | | | | | | DD/MM/YYYY | | | | | | | | | | | | | | | |
| **Finished working with referee:** | | | | | | | | | | | | | DD/MM/YYYY | | | | | | | | | | | | | | | |
| **Part F** | | **Confirmation** | | | | | | | | | | | | | | | | | | | | | | | | | | |
| By submitting this form with my application, I confirm that the information I have provided above and the details in my attached application are, to the best of my knowledge, true and correct. | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Date completed:** | | | | | | DD/MM/YYYY | | | | | | | | | | | | | | | | | | | | | | |
| **Checklist for Applicants:**  Please mark the appropriate boxes to confirm inclusion of the various elements of your application. | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | Graduate program application cover sheet | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | One page statement | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | Resume | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | Academic transcript | | | | | | | | | | | | | | | | | | | | | | | | | | | |

### Please complete this cover sheet and include it with your application.

### Email your application to [hr@pbo.gov.au](mailto:hr@pbo.gov.au)

Please see the [PBO's website](https://www.aph.gov.au/About_Parliament/Parliamentary_Departments/Parliamentary_Budget_Office/About_the_PBO/Corporate_information/Privacy)  for further information on the PBO’s approach to collecting, using, storing and disclosing personal information, or a copy of the PBO’s Privacy Policy can be obtained from the Privacy Officer, by emailing [hr@pbo.gov.au](mailto:hr@pbo.gov.au).