



**Apex Youth in Business Pty Ltd**

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#### **An Equal Opportunity for Everyone**

We do not discriminate on the basis of race, colour, religion, national origin, sex, age, disability, or any other status protected by law or regulation. It is our intention that all qualified applicants be given equal opportunity and that selection decisions be based on job-related factors. Answer each question fully and accurately. No action can be taken on this application until you have answered all questions. Use blank paper if you do not have enough room on this application. PLEASE PRINT, except for signature on back of application. In reading and answering the following questions, be aware that none of the questions are intended to imply illegal preferences or discrimination based upon non-apex program-related information.

#### **Company / Personal Details**

Name:	Surname:
Company Physical Address	Identity Number:
Contact Number:	Email Address:
Business Commencement Date:	Company Registration Number:

<b>Business Type: Industry: (tick)</b>		
Food & Beverage	Finance, Sales and Marketing	
Beauty, Fashion & Textile	Arts, Sports & Entertainment	
Hospitality, Education & Child Care/Development	Health & Wellness	
Retail & Wholesale	Manufacturing, Construction & Engineering	
Forestry & Agriculture	Other (Specify)	

#### **PLEASE READ EACH STATEMENT CAREFULLY BEFORE SIGNING**

I certify that all information provided in this program application is true and complete. I understand that any false information or omission may disqualify me from further consideration for training and may result in my dismissal if discovered at a later date.

I authorize the investigation of any or all statements contained in this application. I also authorize, whether listed or not, any person, school, current employer, past employers and organizations to provide relevant information and opinions that may be useful in making acceptance decision. I release such persons and organizations from any legal liability in making such statements. I understand that if I am extended an offer of advanced training it may be conditioned upon my successfully passing a complete pre-training physical examination. I consent to the release of any or all medical information as may be deemed necessary to judge my capability to do the training for which I am applying.

I UNDERSTAND THAT THIS APPLICATION, VERBAL STATEMENTS BY MANAGEMENT, OR SUBSEQUENT TRAINING DOES NOT CREATE AN EXPRESS OR IMPLIED CONTRACT OF EMPLOYMENT NOR GUARANTEE TRAINING FOR ANY DEFINITE PERIOD OF TIME. ONLY THE PRESIDENT OF THE ORGANIZATION HAS THE AUTHORITY TO ENTER INTO AN AGREEMENT OF TRAINING FOR ANY SPECIFIED PERIOD AND SUCH AGREEMENT MUST BE IN WRITING, SIGNED BY THE PRESIDENT AND THE TRAINEE. IF TRAINED, I UNDERSTAND THAT I HAVE BEEN ACCEPTED AT THE WILL OF THE APPLICANT AND APEX YBP MAY TERMINATE AT ANY TIME, WITH OR WITHOUT REASON AND WITH OR WITHOUT NOTICE.

The information provided will only be used solely for the purpose of this application and in full compliance with POPI act

By submitting this form I understand that I am not automatically accepted in the program. Due processes will be followed to confirm candidacy into the program for qualifying candidates.

I have read, understand, and by my signature consent to these statements. Signature: \_\_\_\_\_