



FULL MEMBERSHIP

APPLICATION FORM

Current March 2007

a. YOUR ORGANISATION'S DETAILS

To be completed and returned electronically; and also printed, signed and returned to Job Futures Ltd

Date of Application

Legal Name

Address of Registered Office

Trading Name

If you have more than one trading name, list the other trading names

Incorporation status (name of Legislation and State), and Incorporation Number

Date of Incorporation

TAX STATUS

What is your Organisation's ABN Number? _____

Is your Organisation endorsed as an income tax exempt charity? Yes No

Is your Organisation endorsed as a deductible gift recipient? Yes No

Is your Organisation endorsed as a Public Benevolent Institution (PBI)? Yes No

ORGANISATION CONTACT NUMBERS

For general business enquiries

Telephone _____

Facsimile _____

Mobile _____

Email _____

Website _____

NAME OF CEO + CONTACT DETAILS

Name _____
Position _____
Telephone _____
Fax _____
Mobile _____
Email _____

Number of FTE (Full Time Equivalent) employees employed by your organisation

*** Please attach your Organisation Chart (if available)**

WHAT ARE THE MISSIONS/ GOALS OF YOUR ORGANISATION?

BRIEFLY DESCRIBE YOUR ORGANISATION'S REASONS FOR/ INTEREST IN JOINING JOB FUTURES.

DOES YOUR ORGANISATION SPECIALISE IN SERVICES FOR A PARTICULAR TARGET GROUP? (E.G. People with Disabilities young people Indigenous Australians)

No

Yes ► **To what extent do you/ are you willing to provide services for a generalist target group?**

HOW WOULD YOU DESCRIBE YOUR ORGANISATION?

Select all appropriate boxes and/or enter description in 'Other' field.

- Aboriginal association or council established under *Aboriginal Councils and Associations Act 1976*
- Partnership
- Proprietary company
- Public company
- An Australian Stock Exchange listed company
- Company limited by guarantee
- Government agency (Commonwealth/State/Local)

- Commonwealth/State-owned corporation
- Incorporated association
- Unincorporated association
- Registered charity
- Sole trader
- Trust/ Unit trust
- Union (recognised under industrial legislation)

Other (describe below)

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IS YOUR ORGANISATION A MEMBER OF AN INDUSTRY ASSOCIATION?

- No
- Yes ► **Provide details below**

| <i>Name of industry association</i> | <i>Telephone contact</i> |
|-------------------------------------|--------------------------|
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IS YOUR ORGANISATION REGISTERED UNDER ANY LEGISLATION?

- No
- Yes ► **Enter legislation here**

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Legislation issued number(s)

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State/ Territory

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DOES YOUR ORGANISATION HAVE AN ACCOUNTANT?

- No
- Yes ► **How long has the accountant been associated with your organisation?**

| | |
|--|-------|
| | years |
|--|-------|

If YES, what is the accountant's name, postal address and status?

| <i>Name</i> | <i>Postal address</i> | <i>Status* (eg CPA Aust, NIA)</i> |
|-------------|-----------------------|-----------------------------------|
| | | |

DOES YOUR ORGANISATION HAVE AN EXTERNAL AUDITOR?

No

Yes ► **What is the auditor's name, postal address and status?**

| <i>Name</i> | <i>Postal address</i> | <i>Status* (eg CPA Aust, NIA)</i> |
|-------------|-----------------------|-----------------------------------|
| | | |

HOW IS THE GOVERNANCE BODY OF YOUR ORGANISATION ELECTED/ APPOINTED?

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NAMES OF CHAIR + OTHER BOARD MEMBERS

| <i>Chair/ President</i> | <i>Surname</i> | <i>Given names</i> | <i>Number of years in position(s) of influence in your organisation</i> |
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IN THE FIVE (5) YEARS PRECEDING THE DATE OF THIS APPLICATION HAS YOUR ORGANISATION BEEN UNDER INVESTIGATION OR IN ADMINISTRATION?

No

Yes ► **Please advise details**

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HOW DOES YOUR ORGANISATION APPLY ANY SURPLUS FUNDS GENERATED BY THE BUSINESS?

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BANKING DETAILS FOR PAYMENTS

BSB Number _____
Account Number _____
Account Name _____
Bank Name _____
Bank Branch _____

b. COMMUNITY CONNECTIONS

PLEASE LIST DETAILS OF THE SITES WHICH YOU CURRENTLY OPERATE

| | |
|-------------------------|--|
| Location/ Suburb | |
| Post Code | |
| LGA/Shire | |
| Street Address | |

| | |
|-------------------------|--|
| Location/ Suburb | |
| Post Code | |
| LGA/Shire | |
| Street Address | |

| | |
|-------------------------|--|
| Location/ Suburb | |
| Post Code | |
| LGA/Shire | |
| Street Address | |

PLEASE ADVISE GEOGRAPHIC COVERAGE INCLUDING OUTREACH SERVICES

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PLEASE DESCRIBE THE WAYS IN WHICH YOU DEVELOP AND MAINTAIN COMMUNITY LINKAGES, SUCH AS LOCAL ADVISORY COMMITTEES, REFERENCE GROUPS, ETC.

Include the names of some of the organisations you work with (attach additional page if necessary)

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WHAT OTHER PROGRAMS OR SERVICES DO YOU CURRENTLY PROVIDE? (EG PERSONAL SUPPORT, COUNSELLING)

Please provide details

IS YOUR ORGANISATION A REGISTERED TRAINING ORGANISATION (RTO)?

No

Yes ► **What is the trading name of the RTO?**

NTIS / RTO Number

PLEASE PROVIDE A BRIEF STATEMENT SUMMARISING YOUR PERFORMANCE IN DELIVERY OF THE MAIN CONTRACTS HELD BY YOUR ORGANISATION AND DEMONSTRATING YOUR ORGANISATION'S EFFECTIVENESS.

(You may also wish to attach any relevant performance reports)

d. REFEREES

PLEASE PROVIDE THE DETAILS OF TWO (2) REFEREES WHOM JOB FUTURES CAN CONTACT REGARDING YOUR ORGANISATION'S EXPERTISE AND EXPERIENCE.

Name _____
Position _____
Organisation _____
Telephone _____
Mobile _____
Email _____
Relevance _____

Name _____
Position _____
Organisation _____
Telephone _____
Mobile _____
Email _____
Relevance _____

e. YOU MUST ATTACH

Please attach copies of the following documents with this application

Your Organisation's Constitution, Rules, or Memorandum and Articles of Association

Your Organisation's last Annual Report and fully audited Financial Statements for the latest financial year

Sample promotional materials for the agency and services provided, especially employment and training services

A copy of your Organisation's Strategic Plan and Code of Conduct

Note *If any of the information requested is contained in another document supplied you may provide a reference to it rather than duplicate the information.*

f. ETHICAL CONDUCT

Job Futures Ltd and its members seek to act in a manner which is both ethical and effective.

Job Futures Ltd applies for Job Network and other business from the Commonwealth Government and State/Territory on behalf of its members and when it is successful it distributes that business amongst its members in an equitable and effective manner.

Members of Job Futures Ltd understand that Job Futures Ltd acquires services from its members on condition that members do not tender to supply the same services on their own individual account.

All information given to Members by Job Futures Ltd is given for a limited purpose. Information includes confidential information such as trade secrets. This confidential information includes manuals and other written material, electronic storage and computer printouts concerning information about, or issued by or on behalf of, Job Futures, and is not limited to but includes information about the way Job Futures conducts its business, advice on the way its members should conduct their businesses, Job Futures' tender and other processes, and any lists of Job Futures' clients.

After their period of membership, Members of Job Futures Ltd will return immediately all confidential information of Job Futures Ltd, and will not retain, copy or use any record, representation or reproduction of the confidential information. Members will ensure that their employees and agents also observe these restrictions.

Members of Job Futures Ltd will not, whether during or after their period of membership, disclose to any third parties nor use any such trade secrets or confidential information without the prior written approval of Job Futures Ltd which approval may be given or withheld at the absolute discretion of Job Futures Ltd.

g. YOUR APPLICATION

Acting within the Authority of

(insert name of Organisation)

I

(insert the name of Authorised Applicant)

hereby apply for **Full Membership of Job Futures Ltd.**

If admitted as a Full Member of Job Futures Ltd, I confirm that my organisation will:

1. Comply with the ethical conduct of Job Futures Ltd as set out in Section F of this application.
2. Abide by the requirements of membership of Job Futures Ltd as set out in the policy on *Members Rights and Responsibilities & National Office Charter of Service to Members (*)*.
3. Support the Job Futures *Code of Conduct (*)*.

Both I and my organisation understand and acknowledge that acceptance of these obligations is a condition of the organisation's membership of Job Futures.

I also understand that once admitted as a Full Member my organisation will pay an annual subscription of **\$5,500** (GST inclusive) to Job Futures Ltd within 14 days of notification of acceptance of the application for Full Membership by the Board of Directors of Job Futures Ltd.

I certify that all information supplied on behalf of my organisation is true and accurate.

(Signature of Authorised Representative)

(Print Name)

(Position)

(Date)

() enclosed with this application form*