

Please complete these questions to assist us with determining your eligibility for Disability Employment Services.

Date

Customer Details

Name

Date of Birth

Address

Phone Email

JSID

CRN

Eligibility Questions

Do you have a disability, injury or health condition? If YES, please specify. YES NO

Are you receiving a Centrelink income support payment or pension? If YES, please specify. YES NO

Are you receiving services from another Employment Services Provider? If YES, please specify. YES NO

Are you receiving support from the National Disability Insurance Scheme (NDIS)? If YES, please specify. YES NO

Are you currently employed? If YES, how many hours worked per week? Please specify. YES NO

Eligibility Questions

| | | | |
|--|------------------------------|-----------------------------|--|
| Are you aged between 14 - 66 years old? | <input type="checkbox"/> YES | <input type="checkbox"/> NO | |
| Are you at or above the minimum legal working age in your State or Territory? | <input type="checkbox"/> YES | <input type="checkbox"/> NO | |
| Do you have a future capacity to work of at least 8 hours per week? | <input type="checkbox"/> YES | <input type="checkbox"/> NO | |
| Are you an Australian resident or a Temporary Protection Visa, Safe Haven Enterprise Visa or Special Category Visa holder? | <input type="checkbox"/> YES | <input type="checkbox"/> NO | |
| Are you studying full-time? | <input type="checkbox"/> YES | <input type="checkbox"/> NO | |

How did you hear about Maxima? Please specify.

Notes

Office Use Only

| | | | |
|-------------------------------|------------------------------|-----------------------------|--|
| Maxima Staff Member Name | | | |
| Maxima Site | | | |
| File created in JobReady Live | <input type="checkbox"/> YES | <input type="checkbox"/> NO | |