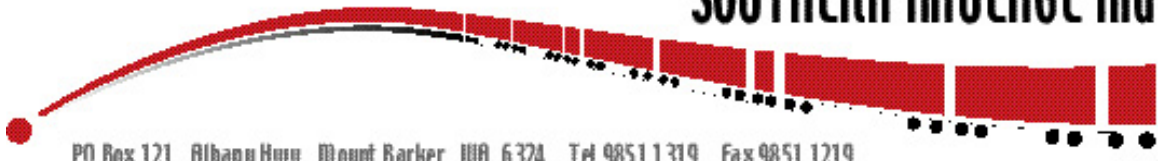


SOUTHERN HAULAGE Ind



PO Box 121 Albany Hwy Mount Barker WA 6324 Tel 9851 1319 Fax 9851 1219

EXPRESSIONS OF INTEREST – JOB APPLICATION FOR SOUTHERN HAULAGE INDUSTRIES

NAME: _____
ADDRESS: _____
PHONE: _____ MOBILE: _____
DATE OF BIRTH: _____
DRIVER LICENSE NUMBER: _____
CLASS: _____

EXPERIENCE (DRIVING):

EXPERIENCE (MECHANICAL):

OTHER SKILLS/COMPLETED COURSES:

OTHER RELEVANT INFORMATION:

Please attach a copy of your resume.

Email to Karen reception@southernhaulage.com.au