



## **SKELETON WEED SUPPORT OFFICER (Casual)**

The Shire of Yilgarn invites applications for the position of Skeleton Weed Support Officer, which is a casual role. The position will involve 35 hours per fortnight **(as required)**, with flexible working arrangements available. The primary responsibilities of the position are:

- Providing administrative support for the Yilgarn Local Action Group;
- Provide reception support for Department of Primary Industries and Regional Development;
- Assist affected landholders meet their skeleton weed program requirements;
- Assist Yilgarn Local Action Group with winter treatment of affected sites;
- Collect and maintain information related to Skeleton weed searching and treatment;
- Assist in preparing reports and financial acquittal/budget applications.

While no previous experience working with skeleton weed is required, a basic knowledge of the plant, control program and the Yilgarn area would be beneficial.

The position is fully funded by the Grains, Seeds and Hay Industry Funding Scheme, and therefore is reliant on grant funding to continue each year and operates out of the DPIRD Office located on Arcturus Street, Southern Cross.

Council operates under the Shire of Yilgarn Enterprise Agreement 2021, salary and conditions will be in accordance with this agreement. This casual position is classified as a Level 5 and will be applied on a pro-rata basis. The salary package for a level 5 position is as follows:

- \$29.15 per hour
- 25% Casual Loading

An application pack is available at [www.yilgarn.wa.gov.au](http://www.yilgarn.wa.gov.au). Further information can be obtained by contacting Executive Manager Regulatory Services – Shane Chambers on 9049 1001 or [emrs@yilgarn.wa.gov.au](mailto:emrs@yilgarn.wa.gov.au).

Written applications, addressed to the CEO and marked confidential, will be received up to **4:00pm Friday 28<sup>th</sup> January 2022** and should be marked "Confidential Application – Skeleton Weed Support Officer". Refer to the Application Pack on what forms to complete and how to apply.

**Nic Warren**  
**Chief Executive Officer**  
**Shire of Yilgarn**  
**PO Box 86**  
**SOUTHERN CROSS WA 6426**

**PLEASE NOTE:** Canvassing of Councillors will lead to disqualification. If successful in obtaining the position you will be required to obtain relevant police checks, and to provide evidence of all claimed qualifications prior to commencing employment. This position is subject to a National Police Clearance and Pre-Employment Medical Assessment.

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## INFORMATION FOR PROSPECTIVE APPLICANTS

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Thank you for your interest in the advertised position. These guidelines are presented to assist your application process, please read the following information.

### **Eligibility**

Check the requirements (skills, qualifications, experience) for the position as described in the advertisement and position description to assess your suitability for the role. The successful applicant is required to provide evidence of all claimed qualifications prior to commencing employment.

As an Equal Employment Opportunity employer, the Shire of Yilgarn encourages applications from individuals of diverse backgrounds to apply, to join us in servicing our community.

*Note:* Canvassing of Councillors will disqualify.

### **Preparing your Application**

In order to be considered for a position, you must be able to demonstrate your suitability for the position advertised. Applications will be assessed against the requirements (skills, qualifications, experience) outlined in the position description.

The decision to shortlist applicants will be based on the information provided in the application against the requirements described in the position description.

If at all possible, your application should be typed. If this is not possible, ensure that your writing is clear and easy to read. Your application should include:

- Application for Employment Form
  - ✓ Please complete the application form included in this information.
  - ✓ Include a covering letter addressing your suitability for the role.
  - ✓ Reference the position you are applying for, and your desire and suitability, together with any relevant information on your availability for an interview.
  - ✓ You may wish to summarise your application and emphasise your strongest points and achievements.
- Current Resume/Curriculum Vitae
  - ✓ Personal Details – Name, address and telephone number.
  - ✓ A summary of your work history starting with the most recent. Information should include employment dates and details of duties, performance and your achievements in each job. Don't forget to add any experience you may have of acting/relieving in this role or similar.
  - ✓ Any activities you have undertaken outside of work which are relevant to the application.
  - ✓ Your qualifications, education and training achievements (be sure to include any education you are currently undertaking).
  - ✓ Photocopies of relevant formal qualifications (if available).

- **Referees**

Two referees plus their contact phone numbers must be nominated in your application – they must be able to comment on your work performance (e.g. your direct supervisor/manager). Referees should be contacted for approval before listing them in your application.

*Note:* An application for one position will not be held over to be used for another position.

### **Closing Date**

Check the closing date for the application. Ensure your application is received at the Administration Office before the closing date and time, as applications received after this date are **NOT CONSIDERED**.

### **Lodgement of Application**

You should provide us with only one copy of your complete application. Please do not submit your application in plastic sleeves, cardboard folders, binders, files or spiral bound. Please do not submit originals of documents, as applications for employment are not normally returned. All applications may be submitted in any of the following ways:

#### *Written submissions*

Please address your application to:

Chief Executive Officer  
Shire of Yilgarn  
PO Box 86  
SOUTHERN CROSS WA 6426  
(Mark envelope "Confidential" and title of the position applying for)

#### *Hand delivery*

You can hand deliver your application to:

Shire of Yilgarn – Administration Office  
23 Antares Street  
Southern Cross WA 6426  
Between 8:30am and 4:30pm – Monday to Friday.

#### *Electronic (Emailed) submissions*

Please ensure that your application is submitted in Microsoft Word compatible format. Send applications to [payroll@yilgarn.wa.gov.au](mailto:payroll@yilgarn.wa.gov.au)

### **Post Application Process**

- Short listed applicants will be notified by telephone.
- All unsuccessful applicants will be notified in writing once an offer of employment has been accepted.

## **Interviews**

If you are shortlisted, you will be invited to attend an interview which may be with 2 or 3 interviewers (i.e. HR, Supervisor, and Manager). The interview questions are designed to assess your suitability to the position you are applying for, and will consistently be asked of every applicant. Some of the questions will be asking you to describe specific examples of your past work experiences. The interviewers will take note of your responses to the questions to assist with the selection process.

The interview is also your opportunity to ask questions to assess the position's suitability for you! Feel free to prepare a few questions you may wish to ask the interviewers.

At the completion of the process, all applicants will be notified of the outcome of their application.

## **Records**

Your application and any information gathered on your application throughout the recruitment process will be kept confidential for a period no longer than six (6) months and disposed of securely.

## **Offer of Employment**

If offered the position, and prior to appointment, prospective employees shall be required to undertake the following:

- Pre-Employment Medical Examination

Appointment to the position is not confirmed until a pre-employment medical examination is completed and accepted. This may also include a Drug & Alcohol Screening Test.

The cost of the Pre-Employment Medical Examination will be met by the Shire of Yilgarn after appointment.

Also provision of:

- Police Clearance

The successful applicant will be required to obtain a National Police Clearance Certificate not more than three months old.

- Right to Work in Australia Verification

Australian Passport or Birth Certificate.

If prospective employee is not an Australian citizen, a Visa Entitlement Verification.

## **Queries?**

If you require any further information or have any questions regarding the position, your application or the selection process, please contact Human Resources on 9049 1001.

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## CONDITIONS, BENEFITS AND REMUNERATION

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The following Conditions of Employment are as per:

- Shire of Yilgarn Enterprise Agreement 2021 and/or
- Local Government Industry Award 2020 (LGIA) and/or
- National Employment Standards (NES)

and the below mentioned conditions should not be construed to be the limitations of conditions.

### **STANDARD CONDITIONS:**

#### Equal Employment Opportunity

The Shire of Yilgarn is an equal opportunity employer and has adopted an EEO policy in accordance with legislation. A copy of the policy is available for all staff to read and is provided in your 'Council Staff Policy Manual'.

#### Working Hours

As required.

#### Superannuation

Currently the Shire of Yilgarn contributes compulsory superannuation of an employee's gross pay (excluding allowances) at 10% as per the Superannuation Guarantee.

#### Probationary Period

A probationary period of three (3) months is applicable to this position (unless otherwise specified). During the period performance will be assessed and managed against the requirements set out on the Position Description. The probation period can be extended if initial performance is unsatisfactory.

#### Annual Performance Review

If the appointee is granted permanency, a Staff Development Performance Review will take place at least once in every calendar year. The annual review will include an assessment of achievement of the key duties and responsibilities and will be used to identify training and development needs.

#### Code of Conduct

All staff are to be familiar with and abide by the adopted Staff Code of Conduct. A copy of the Code is available for all staff to read.

## APPLICATION FOR EMPLOYMENT

Thank you for your interest in this position with the Shire of Yilgarn. Please complete the following questions and attach with your application.

| VACANCY DETAILS                                                                                                                                                                           |                                                    |                                                          |                                                                                                                    |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------|----------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------|
| <b>Position Title:</b>                                                                                                                                                                    |                                                    |                                                          |                                                                                                                    |
| PERSONAL DETAILS                                                                                                                                                                          |                                                    |                                                          |                                                                                                                    |
| <b>Surname:</b>                                                                                                                                                                           |                                                    | <b>Title:</b>                                            | <input type="checkbox"/> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Ms <input type="checkbox"/> Miss |
| <b>Given Names:</b>                                                                                                                                                                       |                                                    | <b>Date of Birth:</b>                                    |                                                                                                                    |
| <b>Address:</b>                                                                                                                                                                           |                                                    |                                                          |                                                                                                                    |
| <b>Suburb:</b>                                                                                                                                                                            |                                                    | <b>Postcode:</b>                                         |                                                                                                                    |
| <b>Email:</b>                                                                                                                                                                             |                                                    |                                                          |                                                                                                                    |
| <b>Daytime Contact No:</b>                                                                                                                                                                |                                                    | <b>Mobile:</b>                                           |                                                                                                                    |
| Are you an Australian Citizen or permanent resident of Australia?                                                                                                                         |                                                    | <input type="checkbox"/> Yes <input type="checkbox"/> No |                                                                                                                    |
| If no, do you currently hold a Visa allowing you to work in Australia?<br>(If yes, please attach a copy.)                                                                                 |                                                    | <input type="checkbox"/> Yes <input type="checkbox"/> No |                                                                                                                    |
| Do you hold a current Motor Vehicle Driver's Licence?<br>If yes, please provide details:                                                                                                  |                                                    | <input type="checkbox"/> Yes <input type="checkbox"/> No |                                                                                                                    |
| <b>State:</b>                                                                                                                                                                             | <b>Class(es):</b>                                  | <b>No#:</b>                                              | <b>Expiry:</b>                                                                                                     |
| Do you hold a current: <input type="checkbox"/> National Police Clearance <input type="checkbox"/> Working with Children Check <input type="checkbox"/> willing to obtain clearance/s. OR |                                                    |                                                          |                                                                                                                    |
| RECRUITMENT SOURCE                                                                                                                                                                        |                                                    |                                                          |                                                                                                                    |
| How did you <b>first</b> become aware of this vacancy?                                                                                                                                    |                                                    |                                                          |                                                                                                                    |
| <input type="checkbox"/> Shire of Yilgarn website                                                                                                                                         | <input type="checkbox"/> Other website             |                                                          |                                                                                                                    |
| <input type="checkbox"/> Local Government Jobs website                                                                                                                                    | <input type="checkbox"/> Local newspaper           |                                                          |                                                                                                                    |
| <input type="checkbox"/> WA Govt Jobs website                                                                                                                                             | <input type="checkbox"/> West Australian           |                                                          |                                                                                                                    |
| <input type="checkbox"/> Word of mouth                                                                                                                                                    | <input type="checkbox"/> Other                     |                                                          |                                                                                                                    |
| ATTACHMENTS                                                                                                                                                                               |                                                    |                                                          |                                                                                                                    |
| Please ensure you have attached all the required documents (see <i>Information for Prospective Applicants</i> for details).                                                               |                                                    |                                                          |                                                                                                                    |
| <input type="checkbox"/> Cover Letter                                                                                                                                                     | <input type="checkbox"/> Resume / Curriculum Vitae |                                                          |                                                                                                                    |
| <input type="checkbox"/> Referees (2 contactable work referees, preferably Supervisors or Managers)                                                                                       |                                                    |                                                          |                                                                                                                    |
| <input type="checkbox"/> Copies of relevant qualifications                                                                                                                                |                                                    |                                                          |                                                                                                                    |
| AVAILABILITY                                                                                                                                                                              |                                                    |                                                          |                                                                                                                    |
| How soon would you be available to commence work:<br>(If currently employed, what is the minimum period of notice required?)                                                              |                                                    |                                                          |                                                                                                                    |

## Declarations

The following declarations are NOT a barrier to being considered for employment, but will assist us to take due care in assessing placement should you be the successful applicant.

| <b>HEALTH</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                |                 |                         |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------|-----------------|-------------------------|
| To the best of your knowledge, do you have a medical condition, injury or disability that would impact your ability to undertake the duties of the position you applied for? <input type="checkbox"/> Yes <input type="checkbox"/> No                                                                                                                                                                                                                                                                                                                                                          |                |                 |                         |
| <b>If "yes", please provide details of condition:</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                |                 |                         |
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| <b>WORKER'S COMPENSATION CLAIM</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                |                 |                         |
| Have you ever made a Worker's Compensation Claim? <input type="checkbox"/> Yes <input type="checkbox"/> No                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                |                 |                         |
| <b>If "yes", please describe claim details (e.g. year of injury, what type of injury, company worked for, period of time off work, etc.):</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                |                 |                         |
| Year of Injury                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | Type of Injury | Name of Company | Period of time off work |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                |                 |                         |
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| Are any claims still current? <input type="checkbox"/> Yes <input type="checkbox"/> No                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                |                 |                         |
| <b>If "yes", please provide details of current claims:</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                |                 |                         |
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| <b>CRIMINAL CONVICTIONS</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                |                 |                         |
| Have you ever been convicted of any offence in any court, or are you currently subject to any charges pending before court, or the subject of an investigation before a tribunal? (You do not need to give details of any conviction which you have had declared spent under the "Spent Convictions Act 1988".) <input type="checkbox"/> Yes <input type="checkbox"/> No                                                                                                                                                                                                                       |                |                 |                         |
| <b>If "yes", please provide details:</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                |                 |                         |
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| <b>APPLICANT DECLARATION</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                |                 |                         |
| I declare that all the above statements and attached supporting information are true in all respects and consent that this information will be stored and used for the purposes of assessing suitability for employment. I understand that in providing referees I consent to them being contacted. I acknowledge that any statement which is found to be false or deliberately misleading will make me, if employed, liable for dismissal. (If submitting a hard copy, please sign and date. If emailing, please enter your name and date, we will consider this consent as described above.) |                |                 |                         |
| <b>Applicant's signature:</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                | <b>Date:</b>    |                         |

## POSITION DESCRIPTION

|                        |                                                   |
|------------------------|---------------------------------------------------|
| <b>POSITION TITLE:</b> | <b>Skeleton Weed Support Officer – HR-PDR-072</b> |
| <b>DEPARTMENT:</b>     | Regulatory                                        |
| <b>LEVEL:</b>          | 5                                                 |
| <b>AWARD:</b>          | Shire of Yilgarn Enterprise Agreement 2021        |
| <b>STATUS:</b>         | Casual – 35 hours per fortnight (as required)     |
| <b>LOCATION:</b>       | Southern Cross                                    |

### 1. POSITION OBJECTIVES:

- 1.1. Work as part of a team with the Yilgarn Local Action Group and the Skeleton Weed Coordinator in providing support to landholders in their responsibility to eradicate Skeleton Weed from their properties;
- 1.2. Undertake all work tasks as directed by the Yilgarn Local Action Group, Skeleton Weed Coordinator and Yilgarn Executive Staff, and ensure they are carried out in an efficient and timely manner and to a high standard;
- 1.3. Provide a high standard of work ensuring that accurate and reliable information is provided whilst providing a helpful, efficient and courteous service to other employees, Yilgarn Local Action Group Committee and the public.

### 2. GENERAL POSITION RELATED INFORMATION:

- 2.1. The person must be physically fit as this position requires work outdoors and in all kinds of weather. Some of the work is physically demanding as it involves bending, lifting and handling various types of tools and equipment;
- 2.2. This position operates out of the Department of Primary Industries and Regional Development- Agriculture and Food WA located in Arcturus Street, Southern Cross under the supervision of Executive Manager Regulatory Services.
- 2.3. This position is reliant on funding from Department of Primary Industries and Regional Development- Grains, Seeds and Hay Industry Funding Scheme to control skeleton weed and eradicate three-horned bedstraw. Funding for the program is guaranteed until 30<sup>th</sup> June each financial year. After this date if funding ceases, this position will also cease.

### 3. KEY DUTIES AND RESPONSIBILITIES:

- 3.1. Provide administrative support to the Yilgarn Local Action Group and its Coordinator by arranging meetings, taking minutes and preparation of reports;
- 3.2. In partnership with Department of Primary Industries and Regional Development-Agriculture and Food WA, provide a reception service for the Southern Cross office; including answering the phone, responding to client queries, receiving and sending emails, mail collection and any other administration work as required by the Skeleton Weed Local Coordinator;
- 3.3. Assist affected landholders to meet skeleton weed program requirements – provide details of affected paddocks and searching requirements, assist with preparation of search assistance documentation (landholder assistance agreements and search declarations) and paddock search records;



- 3.4. Assist Yilgarn Local Action Group with winter treatment of infested sites in the Yilgarn – send out, receive and collate landholder agreements, provide infested winter spray area information to Skeleton Weed Local Coordinator, collate records of sprayed paddocks and enter onto the Department's Skeleton Weed Database;
- 3.5. Collect information from Skeleton Weed Local Coordinator regarding amount of chemical used, then create invoices for each farmer using the SynergySoft program;
- 3.6. Maintain summer search records for infested properties in the Yilgarn and enter search data on the Department's Skeleton Weed database. Follow up with farmers for paperwork, communicate with Department of Primary Industries and Regional Development-Agriculture and Food WA contact through the summer search season;
- 3.7. During summer searching, liaise with Department of Primary Industries and Regional Development-Agriculture and Food WA Merredin office correct invoices to be paid – farmers or paid contractor – confirming the hectares claimed is correct;
- 3.8. Assist Skeleton Weed Local Coordinator with necessary reporting to Department of Primary Industries and Regional Development-Agriculture and Food WA and financial acquittal/budget application per financial year.

#### 4. ORGANISATIONAL RELATIONSHIPS:

##### 4.1. Responsible to

Chairperson Yilgarn Local Action Group

Skelton Weed Local Coordinator

Executive Manager Regulatory Services

##### 4.2. Supervision of

Contractors engaged in environmental activities

##### 4.3. Liaison

###### Internal

Chief Executive Officer

Senior Management

Other Staff

###### External

General Public

Visitors

#### 5. OCCUPATIONAL SAFETY AND HEALTH:

The following are your responsibilities to ensure that a safe and health work environment is maintained:

- There is an obligation to take reasonable care to ensure personal safety and health at work and that of other persons in the workplace.
- To observe all safe working practices as directed by the supervisor and use of personal protective equipment as provided.
- Report ALL accidents, incidents, near misses and hazardous situations arising in the course of work.

#### 6. EXTENT OF AUTHORITY:

Works under direct supervision and work outcomes are regularly monitored by the Executive Manager Regulatory Services and Skeleton Weed Local Coordinator.

## 7. SELECTION CRITERIA:

### 7.1. Essential

- 7.1.1. Demonstrated experience in a project support, administrative, office management support or secretarial role;
- 7.1.2. Ability to deal with confidential matters in a discreet and sensitive manner;
- 7.1.3. Ability to coordinate and prioritise work to meet targets and deadlines under minimal supervision;
- 7.1.4. Demonstrated ability to effectively communicate in the workplace including using initiative, a high level of oral and written communication skills, the ability to develop and maintain relationships and networks;
- 7.1.5. Ability to use Microsoft Outlook and Excel;
- 7.1.6. Proven ability to work flexibly, with limited supervision and/or as a member of a team;
- 7.1.7. Hold a current WA "C" Class Drivers Licence;
- 7.1.8. Provision of a National Police Clearance (no older than 3 months).

### 7.2. Desirable

- 7.2.1. Competency in the use of Geographic Information Systems software and mapping;
- 7.2.2. Knowledge of skeleton weed and the role of the Local Action Group;
- 7.2.3. Senior/Basic First Aid Certificate;
- 7.2.4. Sound knowledge of the Shire district.

## 8. TRAINING:

The Shire of Yilgarn will provide occupational training and development opportunities to the successful applicant including the costs of attending appropriate training.

## 9. PERFORMANCE REVIEWS:

- 9.1. Reviews shall be conducted annually on the following Key Performance Indicators:
  - 9.1.1. Quality of Work
  - 9.1.2. Quantity of Work
  - 9.1.3. Relationships with people
  - 9.1.4. Initiative
  - 9.1.5. Meeting work deadlines
  - 9.1.6. Decision making
  - 9.1.7. Commitment and attitude
  - 9.1.8. Supervising/Managing work or others (if applicable)

## 10. SALARY PACKAGE DETAILS: (based on 35h per fortnight)

| Hourly rate = \$29.15          | \$            |
|--------------------------------|---------------|
| Cash Component                 | 26,527        |
| Casual Loading @ 25%           | 6,632         |
| Superannuation Guarantee @ 10% | 3,316         |
| <b>TOTAL PACKAGE</b>           | <b>36,475</b> |