



Casual

Part-Time

POSITION APPLIED FOR: School Holidays

Full-Time

Section 1- PERSONAL INFORMATION (Please Print)

First Name (s)	Surname
Residential Address:	Are you known by any other names? Yes / No
Phone Number:	If "Yes" what other name(s) are you known by?
Date of Birth:	Sex: Male/Female

Next of Kin (Name)	Address:	Relationship:
Parent(s) (Names)	Address(es):	

SECTION 2 - EDUCATION (including University, Further Education, Trade)

Name of School/College etc	QUALIFICATIONS AQUIRED

SECTION 3 - EMPLOYMENT HISTORY (Start with the most recent position)

Name of Employer	Address	Length of Service	Position Held	Nature of Work	Reason for leaving

REFEREES - Please give details of three referees who may be contacted. Preferably two work related referees and one personal referee.

Name:	Address:	Phone No:	Occupation

MEMBERSHIP OF BUSINESS, PROFESSIONAL, OR ANY OTHER ORGANISATIONS

Name of Organisation	Office Held (If any)

SECTION 4 - GENERAL

Do You have a current Drivers Licence? If Yes what Class?	Yes / No	Have you ever been convicted of a criminal offence If Yes, give brief details.	Yes / No
Do you have any Demerit points or endorsements Drivers Licence Number	Yes / No		
Have you previously been employed by this enterprise?	Yes / No	Are you awaiting the hearing of charges in a civil or criminal court of law?	Yes / No
Do you have a spouse, partner, relative or household member working with this enterprise or elsewhere in the same industry? If yes Who? Where?	Yes / No	Are you a member of any territorial force unit? If so have you completed your whole time training?	Yes / No Yes / No
Are you legally entitled to work in New Zealand? If your application is accepted, when could you commence employment?	Yes / No	Have you reached the current school leaving age? Have you reached the age at which you may qualify for guaranteed retirement income?	Yes / No Yes / No
Are you prepared to handle all equipment, products/ materials used in this industry? Are you prepared to work outside of ordinary working hours when required?	Yes / No	Do you smoke ?	Yes / No
Are you prepared to work shifts if required?	Yes / No	Have you been off work on ACC in the past? If so what for? <i>If the answer is YES, please obtain a copy of your ACC record and supply to us. No position will be offered until we receive a copy of this report.</i>	Yes / No
	Yes / No	Have you taken a personal grievance case against a previous employer? If so what for?	Yes / No

SECTION 5 - MEDICAL CHECKLIST

The applicant agrees that any offer of Employment made by the company is conditional upon the results of a medical examination and hereby agrees to undergo such medical examination and to provide the company with a medical certificate, certified by a registered medical practitioner prior to commencing employment. If the results of the examination are unsatisfactory to the company then the employment offer will not take effect. The company shall provide the appropriate forms required and shall pay the costs incurred in obtaining the certificate.

Do you agree to undergo a medical examination?	Yes / No
Do you consent to any biological monitoring which may be required by the work done in this position?	Yes / No
Have you any history or medical condition caused by gradual process, disease or infection. For example hearing loss, sensitivity to chemicals, repetitive strain injuries, which may be aggravated or contributed to be the work associated with the position for which the application is made? If Yes Please detail.	Yes / No

SECTION 6 - DECLARATION

..... Declare that to the best of my knowledge, the answers to the questions in this application are correct and I hereby authorise any previous employer or referee to provide the company such information as the company may require a response to any employer related enquiries.

Signature Date

SECTION 7 - ADDITIONAL INFORMATION

Do you have any additional information which you would consider may assist your application? For example achievements, interests, aspirations etc. If so, please attach an additional sheet to this application form.

The personal information about the applicant, contained in this application shall be used by the company only in accordance with the provisions of the Privacy Act 1993.
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