



APPLICATION FOR EMPLOYMENT

PRIVATE & CONFIDENTIAL

Position applied for:

Surname: _____ Given name(s): _____ Title: _____

Address: _____

Telephone number (landline): _____ (mobile): _____

Date Of Birth: _____

Email address: _____

Do you have current driving licence? Yes No

Details of licence: _____ Licence Number: _____

Expiry date: / /

Position Type: Part-Times Full-Time

Do You Smoke/ Vape? Yes No

Are there any restrictions on you taking up employment in New Zealand? Yes No
 (If yes, please provide details)

Visa type: _____

Visa Expiry Date: _____

Available per week:

	Mon	Tues	Wed	Thurs	Fri	Sat	Sun
Morning (.....am to..... pm)							
Afternoon (.....pm tom)							
Graveyard (.....m toam)							

Start employment :.....

Emergency Contact Details:

Name: _____	Name: _____
Relation to you: _____	Relation to you: _____
Phone No: _____	Phone No: _____
Physical Address: _____	Physical Address: _____

Education history

Schools: _____ Qualifications gained: _____

Colleges/universities _____ Qualifications gained: _____

Other training: _____ Qualifications gained: _____

Employment history

(Please complete in full listing your most recent employment first and use a separate sheet if necessary)

1. Name of employer: _____
Address of employer: _____

Job title and duties: _____
Start Date: _____ Finish Date: _____
Reason for leaving: _____
Notice required in current role: _____

2. Name of employer: _____
Address of employer: _____

Job title and duties: _____
Start Date: _____ Finish Date: _____
Reasons for leaving: _____

3. Name of employer: _____
Address of employer: _____

Job title and duties: _____
Start Date: _____ Finish Date: _____
Reason for leaving: _____

4. Name of employer: _____
Address of employer: _____

Job title and duties: _____

Start salary: _____ Finish salary: _____
Reason for leaving: _____

Current membership of professional bodies

Please note any professional bodies you are a member of or are registered with.

Other employment

Please note any other employment you would continue with if you were to be successful in obtaining this position.

References

Please note the names and addresses of two persons from whom we may obtain both character and work experience references.

1. Name: _____
Address: _____
Ph: _____
Known in the capacity of _____
(i.e. Manager/Education) _____

2. Name: _____
Address: _____
Ph: _____
Known in the capacity of: _____
(i.e. Manager/Education) _____

Leisure

Please note your leisure interests, sports and hobbies, other pastimes etc.

Criminal record

Please note any criminal convictions. If none, please state. In certain circumstances, employment is dependent upon obtaining a satisfactory Police vetting check and/or children's worker safety check.

Please detail here your reasons for this application, your main achievements to date and strengths you would bring to this role. Specifically, please detail how your knowledge, skills and experiences meet the requirements of this role (as summarised in the position/job advertisement).

General comments

Declaration

(Please read this carefully before signing this application)

1. I confirm that the above information is complete and correct and that any untrue or misleading information will give my employer the right to terminate any employment contract offered.
2. I agree that the employer reserves the right to require me to undergo a medical examination. I understand that should the employer require further information and wish to contact my doctor with a view to obtaining a medical report, the employer will inform me of their intention and obtain my permission prior to contacting my doctor. In addition, I agree that this information will be retained on my personnel file during employment and for up to six years thereafter.
3. I agree that should I be successful in this application, I will, if required consent to a Police vetting check and/or children’s worker safety check. I understand that should I fail to do so, or should the check not be to the satisfaction of my employer, any offer of employment may be withdrawn, or my employment terminated.

Signed: _____ Date: / / _____