

Employment Application

Application to be completed in applicant's own handwriting - please print.

ied For _					
d	Full time □	Part t	time □	Casual □	
<u>rmation</u>					
(first)		(middle)	(las	of)	
(III St)		(middle)	(las	o.,	
Suburb :		Town/City:		Postcode :	
3uburb		Town/City		FOSICOGE .	
current dri	ver's licence?	Yes □ No □	License Num	nber:	
Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
y vour ideal	normal weekly	hours (minin	num to max	imum)	
HYSICAL P suffered any	PARTICULARS type of persona	` S al injury cause	ed by a work-	,	process,
		•		k-related gradu	al process
•				ition that could l	namper you
		any medication ng that your en			
ii iiiis positio	ii oi is sometiii	5		ia se amai e en	
n uns posido	Yes □		•	20 4 0 0	
-			•	.a 20 awa. 0 o	
	y the days a Tuesday nything that rests, upcoming etc. If yes please to any ection? had any con or infection? had any seriestion?	rmation (first) Suburb: a current driver's licence? y the days and times that y Tuesday Wednesday mything that may hinder or cless, upcoming study, religiousetc. If yes please explain furth the days and times that y Tuesday Wednesday hything that may hinder or cless, upcoming study, religiousetc. If yes please explain furth the days and times that y Tuesday Wednesday hything that may hinder or cless, upcoming study, religiousetc. If yes please explain furth the days and times that y Tuesday Wednesday hything that may hinder or cless, upcoming study, religiousetc. If yes please explain furth y your ideal normal weekly had any condition, which is or infection? Yes I had any serious illness, operation? Yes I	Timation (first)	Comment Comm	Transition Casual Casual

LEGAL Have you been charged with any offences in the last 5 years? If 'yes', please provide details: Do you have <u>any</u> legal proceedings pending? If 'yes', please provide details: Is your financial position and credit rating sound? If unsure, give particulars. Are you a New Zealand citizen or resident? Yes □, No □ If you are not a resident or citizen are you legally entitled to work in New Zealand? Yes □ Non-residents/citizens please specify details of your legal entitlement to work (type of work permit, working visa, other, terms and expiry date): Work permits or evidence of authority to work in New Zealand may be requested. WORK HISTORY: ALL prior positions must be listed. Last or Present Position Employer Nature of work ______To____ Reason for leaving Previous Employer Nature of work ______From(date)_____To____ Reason for leaving _____ Previous Employer Nature of work _____ From(date) To Reason for leaving Please list any other positions held:

REFERENCES/REFEREES

<u>Please supply the names and telephone numbers of at least two Referees</u> Please provide last employer and at least one previous employer.

Referee 1	
Relationship	Contact Phone Number
Referee 2	
Relationship	Contact Phone Number
Do you have a General Manager's certificate Alcohol Act? Yes □ No □ Please provide a	e for the purposes of the Sale and Supply of copy.
	ng Act Requirements Have you been declined ct or been declined a General Manager's Certificate? If 'yes', please provide details.
Qualifications (Certificates to be supplied)	
APPLICANT'S DECLARATION	
contained herein for the purpose of ascertaining mand criminal record checks through the appropriemployers. I understand that if I have given false o information, I may not be considered for appointmentare discovered, my employment may be terminated.	d correct and authorise investigation of all information by suitability for employment, including conducting creditate authorities and contacting referees and previous remisleading information or if I have left out any important of I am appointed before any inaccuracies on this form the I understand that in some situations, providing false trimes Act. I understand that if I accept employment I will and procedures issued by the establishment.
Applicant's signature	Date: