

## EMPLOYMENT APPLICATION

Mr/Mrs/Ms/Miss \_\_\_\_\_ Date of Birth \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_ Phone No. \_\_\_\_\_

Ethnicity \_\_\_\_\_

Position applied for \_\_\_\_\_

Hours available \_\_\_\_\_ Total per week \_\_\_\_\_

MRSA check

Hepatitis B check

	Yes	No
Are you addicted to drugs, alcohol, gambling, other?	<input type="checkbox"/>	<input type="checkbox"/>
Do you smoke cigarettes?	<input type="checkbox"/>	<input type="checkbox"/>
Were you born in New Zealand?	<input type="checkbox"/>	<input type="checkbox"/>

If no, please provide evidence of your entitlement to work in NZ \_\_\_\_\_

Do you have a current drivers license?	<input type="checkbox"/>	<input type="checkbox"/>
Do you own your own car?	<input type="checkbox"/>	<input type="checkbox"/>
Do you have any court convictions?	<input type="checkbox"/>	<input type="checkbox"/>

If yes, please comment \_\_\_\_\_

\_\_\_\_\_

Do you have any injury or disability that would affect your capacity to do the work required?  
If yes, please describe

\_\_\_\_\_

\_\_\_\_\_

Education \_\_\_\_\_

\_\_\_\_\_

Professional/Technical qualifications \_\_\_\_\_

\_\_\_\_\_

Do you have any other studies planned? \_\_\_\_\_

Please complete the information over the page.

Nominate three referees including contact information: (The applicant gives the authority for referees to be contacted for reference checking.)

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You may choose to provide a curriculum vitae in place of completing a summary of your employment history

Please list Previous positions, the companies and dates you have worked, and with what responsibility:

Any other information you would like to add:

I acknowledge that any misrepresentations or omissions in this application will be grounds for termination. I hereby give permission for the employer to contact my referees.

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Signed by applicant

Date