

## Application for Employment

Date of Application: \_\_\_\_\_

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

## Your Personal Details

Surname: \_\_\_\_\_

Given Names: \_\_\_\_\_

Are you known by any other name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Mobile: \_\_\_\_\_

Email: \_\_\_\_\_

Bank Account no: \_\_\_\_\_

Emergency contact name and phone: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

IRD no: \_\_\_\_\_ Tax Code: \_\_\_\_\_

Kiwisaver: YES or NO

## Ability to work in New Zealand

Are you legally entitled to work in New Zealand? Yes  No

If yes is that because:

You are a New Zealand Citizen Yes  No

You are a Permanent Resident Yes  No

You hold a current Work Permit Yes  No

Work Permit Expiry: \_\_\_\_\_

You may be required to produce evidence of your right to work as a condition of any offer of employment.

## Languages

Can you hold an every day conversation in any language other than English? \_\_\_\_\_

## Qualifications

Provide details of any University Degrees and/or Qualifications (give details): \_\_\_\_\_

Do you have any other qualifications / certificates / licences / or attended any courses? (give details):

\_\_\_\_\_

## Employment History

Starting with your current employer. Can attach CV with employment history. Ensure information covers the last 5 years.

Company Name: \_\_\_\_\_

Position Held: \_\_\_\_\_

Main duties: \_\_\_\_\_

Reason for leaving: \_\_\_\_\_

Do you consent to the centre contacting your present employer for the purpose of reference checking?    Yes  No

Phone: \_\_\_\_\_

Company Name: \_\_\_\_\_

Position Held: \_\_\_\_\_

Main duties: \_\_\_\_\_

Reason for leaving: \_\_\_\_\_

Have you been the subject of disciplinary action or been dismissed by a previous employer? Yes  No

If yes, please detail:

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**Referees**

Give name, address and phone number of at least two referees preferably from where you have worked. By providing these details, any signing this application for employment, you are hereby authorising the centre to seek verbal and written information on a confidential basis from the following referees for ascertaining your suitability for the position for which you are applying. Information received on a confidential basis will not be disclosed to you.

Referees Name: _____
Position: _____
Address: _____
_____
Phone: _____ Mobile: _____

Referees Name: _____
Position: _____
Address: _____
_____
Phone: _____ Mobile: _____

## General

If your application proceeds and all terms and conditions of employment agreed on and accepted when could you commence employment?

\_\_\_\_\_

Are you able to work overtime if required: \_\_\_\_\_

Are you able to work outside the agreed working hours to meet the needs of a child in your care if required?

\_\_\_\_\_

Do you have secondary employment: \_\_\_\_\_  
Are you awaiting the hearing of any charges in a criminal court of law?

\_\_\_\_\_

Have you been convicted of any criminal offences? \_\_\_\_\_

What transport arrangements do you have to attend your place of employment? \_\_\_\_\_

## Medical

Have you had an injury or medical condition that may be aggravated or further contributed

to by the tasks of this job, or affect your ability to effectively carry out the functions and responsibilities of the position applied for?

Yes  No

## Declaration

I declare that:

1. That my answers in this application are true and not misleading, and
2. That there is no further relevant information that I have not disclosed.

I acknowledge that if the centre employs me, they are relying on the truth and completeness of my answers and therefore if I have not answered truthfully and completely, the centre may withdraw any offer of employment prior to acceptance, or terminate my employment without notice.

Signed: \_\_\_\_\_

Date: \_\_\_\_\_

