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Email: info@pukekoblueltd.co.nz Website: www.pukekoblueltd.co.nz

## **Application For Employment**

APPLICATION FOR EMPLOYMENT IN THE POSITION OF WITH PUKEKO BLUE LTD
You should provide complete information for each question, unless otherwise advised, regardless of whether you consider it relevant to the position for which you have applied. Failure to complete this form in manner required may result in your application being declined.
Collecting and holding personal information The information you provide on this application for employment form will be collected and held by: "Pukeko Blue Ltd"
Purpose This information is collected for the purpose of assessing your suitability for employment with Pukeko Blue Ltd.
If your application is successful this form will be retained on your personal file. If unsuccessful it, along with your other application papers, will be kept for a minimum of 12 months.
Your access to this information You have a right of access to personal information and to seek any correction you think necessary to ensure accuracy. You are however advised that any request for evaluative/opinion based material held on you will be declined.
Position Initially in the position of
SECTION 1: PERSONAL INFORMATION (Please print)
First name(s):
Family name:
Residential address:
Email
Contact phone No(s):
If you do not currently reside in the Christchurch area and you were successful in obtaining a position at Pukeko Blue, how long would it take you to relocate to the Christchurch area?
SECTION 2: EDUCATION and QUALIFICATION (Including University, Further Education etc.)
Do you have a current Workplace First Aid Certificate? Yes: No:
Name of Education organisation (e.g. School/College/ Training Establishment) of highest qualification achieved:

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SECTION 2: EDUCATION and QUALIFICATION (contd)
Number of years attended:
Qualifications/Standard of Achievement:
List other qualifications or formal attainments you consider relevant including the issuing authority e.g. Polytechnic, University or Private Training Establishment with the qualifications/standards of achievement and years of attendance:
SECTION 3: EMPLOYMENT HISTORY
Please provide details of all previous employment, stating name of employer, dates of employment, position held, nature of work and reason for leaving.  (Start with the most recent position)
1. Name of Employer:
Length of Service: From: To:
Position Held:
Nature of Work:
Reason for Leaving:
2. Name of Employer:
Length of Service: From: To:
Position Held:
Nature of Work:
Reason for Leaving:
3. Name of Employer:
Length of Service: From: To:
Position Held:
Nature of Work:
Reason for Leaving:
If you are currently employed, what notice period do you need to give your current employer?
SECTION 4: REFEREES
SECTION 4: REFEREES
Please state the details of referees you authorise us to contact to discuss your suitability for employment, preferably two employer referees.
I,
REFEREE 1
Name: Position held:
Company: Relationship to Employee:
Contact Landline Phone
Email:

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REFERE	E 2			
Name:				Position held:
Compan	y:			. Relationship to Employee:
Contact I	Landline	Phone		
Email:				
REFERE	E 3			
Name:				Position held:
Compan	y:			Relationship to Employee:
Contact I	Landline	Phone		
Email:				
SECTIO	N 5:	GENERAI	<u> </u>	
				nst a current or former employer in order to resolve an employment ction or other employment relationship problem.
	Yes:		No:	
Do you ir	ntend to e	engage in o	other paid or	r voluntary work whilst employed in this position?
	Yes:		No:	
		_		_
•				d drivers licence? Yes: L No: L
If yes, wh	nat class?	?		Licence No:
				s for driving offences? (If yes, further information relevant to potential sequent interview.)
	Yes:		No:	
				ean, New Zealand drivers licence,as the role involves transporting our event of an evacuation.
Have you	u ever be	en charge	d with or con	nvicted of a criminal offence? Yes: $\square$ No: $\square$
			o disclose an ate) Act 2004	ny charges or convictions that are eligible to be suppressed under the 4.
If yes, fu	rther info	rmation rel	evant to pote	tential employment may be sought at any subsequent interview.
employm hobbies,	ent durin special ir	g normal v	work hours or ducation, trai	rely commitments which may prevent you from attending your place of or affect your availability for overtime or work-related travel (eg sports, aining)?
Ye	es:	Ц	No:	
If yes, giv	ve brief d	etails:		
Do you h industry?		ouse, parti	ner, relative o	or household member working in this company or elsewhere in the
Ye			No:	

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SECTION 6: V	ISA								
	egal right to work in Ne will be required if yo					nent res	idence c	or a valid wo	rk
Are you a New Ze	ealand citizen, or on a	a current v	visa?	Citizen		Visa			
If you are on a vis	a, what type is it and	what is th	ne expiry date?						
Type of Visa:			_ Visa Expiry	Date:					
Are there any con	nditions on your visa,	and if so,	what are they?	Yes:		No:			
Conditions:									
Is the Visa specific	c to your current emp	oloyer?		Yes:		No:			
SECTION 7: H	IEALTH (Complete a	all question	ons.)						
	d an injury or medica vated or further contr							that may be	
Yes:		No:							
Do you have any of the position app	condition which may a lied for?	iffect your	ability to effective	ely carry	out the	function	s and res	sponsibilities	i
Yes:		No:							
If yes please speci	ify:								
	nerable Service User nza. Would you be p							9 and	
Yes:		No:							
Are you allergic to	o, or have sensitivity t	o, any sul	bstances or cher	micals?	Yes:		No:		
Have you ever su	ffered any back injury	y or back	strain?		Yes:		No:		
Are you taking an	y drugs or medicine?	,			Yes:		No:		
If yes please spec	cify:								
	ered yes to any of the rk will be or could be		s in this section,	please (	give det	ail how	your abi	lity to	
How many days ab sickness, injury and	osence in your last 12 m d/or accident?	nonths of e	mployment were	stated by	you or a	a medica	l practitio	ner to be due	to:
0-2 3-5 6-10 1	1-15 16-20 Over 2	20 day							

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## **SECTION 8: ADDITIONAL INFORMATION** Do you have any additional information you consider relevant to the organisation's decision-making concerning

hiring you for this position. For example, achievements, interests, aspirations, one-off commitments (e.g. for which you will require leave) or other background information pertinent to this position etc. If so, please list below or attach such information to this application form.
SECTION 9: LEAVE - DECLARATION
I, (full name) declare that I understand I am not entitled to any Annual Leave for the first 12 months of employment with Pukeko Blue Ltd.
Do you have any planned leave? (Please provide details below)
In response to Covid-19 any travel restrictions that may apply during your leave:
Will you be taking this leave overseas: Yes: $\square$ No: $\square$
If yes please specify where you will be travelling to:
Signature:
Date:
SECTION 10 - DECLARATION
I,
Signature:
Date:

Please scan and email your completed Application for Employment to info@pukekoblueltd.co.nz

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