



## **APPLICATION FOR EMPLOYMENT**

*(Please Attach your CV)*

### **Position Particulars** *(Please complete all sections of the Application for Employment form)*

Position applied for: (list all positions you wish to be considered for). \_\_\_\_\_

Type of position:      Full time                                   Part time

Expected Earnings: \_\_\_\_\_

Do you have any restrictions on the hours you are available to work?                          Yes/No

Yes, please clarify: \_\_\_\_\_

Please mark off your **availability to work**, please include actual times. Please **DO NOT** mark any times/days that you will not be available. We operate on a changeable roster so we need to know how flexible you are with your start/finish times and your days of work

Day	Morning	Afternoon	Evening
Monday			
Tuesday			
Wednesday			
Thursday			
Friday			
Saturday			
Sunday			

### **Personal Data**

Title:                          Mr.                          Mrs.                          Ms.                          Miss.

Surname: \_\_\_\_\_ First Name: \_\_\_\_\_ Other: \_\_\_\_\_

Address: \_\_\_\_\_ Post Code: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Mobile Phone: \_\_\_\_\_ Email : \_\_\_\_\_

Languages Spoken Fluently (other than English): \_\_\_\_\_

### **Identification/ Visa details**

Are you able to produce identification:      Passport       Driver's License       What Class: \_\_\_\_\_

Birth Certificate

Nationality: \_\_\_\_\_ Place of Birth: \_\_\_\_\_

Are you a permanent NZ resident?                          Yes/No – Please Complete the next 2 questions

What type of visa are you currently holding? (Please tick one)

Student Visa:                          Expiry Date:                           Work Visa:                          Expiry Date:

Holiday Working Visa:                          Expiry Date:                           Other:

Are there any restrictions to your visa: Yes/No (Provide Details): \_\_\_\_\_

**Please answer all the following questions (Place a circle around the correct answer)**

Have you worked shifts before?	Yes/No	Are you prepared to work rotating rosters, with shifts including nights, weekends & Public Holidays?	Yes/No
Do you have any impairment, physical or mental, that would interfere with your ability to perform the job for which you have applied? If yes, please clarify:	Yes/No	If there are any positions or types of positions for which you should not be considered or job duties you cannot perform because of a disability, please explain:	Yes/No
Do you have any previous criminal convictions?	Yes/No	Are you awaiting the hearing of charges in a civil or criminal court of law?	Yes/No
Do you have any demerit points or endorsements?	Yes/No	Are you allergic to, or have any sensitivity to any substances or chemicals that may be aggravated by tasks relevant in this workplace/ position you have applied for?	Yes/No
Are you prepared to handle all products, materials or equipment used in the industry?	Yes/No	Do you have any relatives or known person currently employed by this business? _____ What is the relationship with them? _____	Yes/No
Have you previously worked at a Jet Park Hotel?	Yes/No	Are you prepared to abide by our workplace rules and policies?	Yes/No
Are you prepared to work as and where directed?	Yes/No	Do you consent to the Company retaining the information contained in this application form for the purposes of considering your suitability for any other position which may arise with this business in the future?	Yes/No
I undertake to provide a copy of my birth certificate, permanent residency or work permit within 24 hrs of a request whether verbal or written	Yes/No	Do you have any objections to our seeking verification of and additional information to any matter within this application; this includes contacting your previous employers for reference checking purposes?	Yes/No

**Referees**

Give name, position and telephone numbers of at least three referees from previous employment:

Name: \_\_\_\_\_ Position: \_\_\_\_\_ Phone No: \_\_\_\_\_

Name: \_\_\_\_\_ Position: \_\_\_\_\_ Phone No: \_\_\_\_\_

Name: \_\_\_\_\_ Position: \_\_\_\_\_ Phone No: \_\_\_\_\_

I consent to the company seeking verbal or written information on a confidential basis about me from **any** representatives of my previous employers and/or above listed referees and authorise the information sought to be released by them to the company for the purposes of ascertaining my suitability for the position I am applying for. I understand that the information received by the company is supplied in confidence as evaluative material and may not be disclosed to me.

YES/ Any previous employer or above referee can be contacted. Signature: \_\_\_\_\_ Date: \_\_\_\_\_

NO/ Please only contact above listed referees. Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Applicant's Declaration (To be signed by the applicant before submitting application form)**

I \_\_\_\_\_ (full name) declare that to the best of my knowledge the answers in this application are correct and I understand that if any false or deliberately misleading information, or any material fact is suppressed, I will not be accepted, or if I am employed my employment will be terminated. I also understand that any false information given in relation to my medical history may result in my loss of entitlement for any compensation from ACC.

Applicant's Signature: \_\_\_\_\_

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