

Attached is an application for employment form which are you are requested to personally complete.

The application form is a source of information, which will be used by the Company to assist it in considering your suitability for the position for which you are applying. If successful, such information shall form part of the Company's personnel records. Failure to supply the information requested would prejudice the Company's ability assess your suitability for the position.

[Any offer of employment is made subject to your completing the Company's pre-employment medical to its satisfaction]. (Required if pre-employment medicals are to be undertaken).

You are entitled to access this information upon request to the Company's Privacy Officer where the information is held. This information is currently held at the Company's Marsden Point Administration Office.

CONFIDENTIAL

To be completed personally by Applicant

Date of Application:

APPLICATION FOR EMPLOYMENT

Note: The completion of this form does not indicate that there is any obligation on the Company to engage the applicant.

Purpose: This information is collected for the purpose of assessing your suitability for employment at Northport Ltd, which may include subsequent changes in employment with the Company.

PLEASE PRINT

Position Applied For:

Your Name: How do you like to be addressed:
 Family Name:
 Given Names (underline name used):
 Are you known by any other name(s)?
 Give Details:

Your Contact Address & Telephone Numbers: Contact Address:

 Home Phone No:
 Other No (if any):

Have you reached the current school leaving age? Yes/No

Legal Work Status: Are you legally entitled to work in New Zealand Yes/No
 As: A New Zealand Citizen Yes/No
 A permanent resident Yes/No
 A holder of a current work permit Yes/No

Education: Name of Secondary School(s) attended

 Qualifications (school certificate, university entrance) – (subjects)

 Other Qualifications Yes/No (subjects)

Languages: Can you hold an every day conversation in any language other than English?

Apprenticeship:	Do you have your apprenticeship papers? Yes/No
For trades positions only	In what trade were you apprenticed? What was the name and address of the employer? What trade qualifications do you hold? (ie Trade Cert, Advanced Trade Cert, etc?)
Qualifications:	Do you have any other qualifications/certificates/licences/or attended any course? (Give details): Please describe the skills you hold which are relevant to the position applied for (eg, for a typist – typing speed, word processing capability, shorthand capability, etc)
Employment History:	Present or Most Recent Employer: Company: Address: Job Held:
	Main Duties: No of hours worked per week: Length of Service: Reason for Leaving: For the purposes of compliance with the Privacy Act 1993 do you consent to the Company contacting your present employer for the purposes of reference checking? Yes/No
	Next Most Recent Employer: Company: Address: Job Held:
	Main Duties: No of hours worked per week: Length of Service: Reason for Leaving:
	Next Most Recent Employer: Company: Address: Job Held:
	Main Duties: No of hours worked per week: Length of Service: Reason for Leaving:

Give details of any other job which may relevant:																											
Have you ever worked for this Company or an associated Company before <div style="text-align: right;">Yes/No</div>																											
If yes, where and when:																											
Do you have secondary employment? Yes/No																											
If yes, please detail:																											
Referees:	Give name, address and telephone numbers of at least referees. <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 25%;">Name</th> <th style="width: 25%;">Position</th> <th style="width: 40%;">Address</th> <th style="width: 10%;">Phone No</th> </tr> </thead> <tbody> <tr><td>.....</td><td>.....</td><td>.....</td><td>.....</td></tr> <tr><td>.....</td><td>.....</td><td>.....</td><td>.....</td></tr> <tr><td>.....</td><td>.....</td><td>.....</td><td>.....</td></tr> </tbody> </table>	Name	Position	Address	Phone No										
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If your application is successful, when could you commence employment:																											
<p>I consent to the Company seeking verbal or written confirmation on a confidential basis about me from representatives of my previous employers and/or referees and authorise the information sought to be released by them to the Company for the purposes of ascertaining my suitability for the position for which I am applying. I understand that the information received by the Company is supplied in confidence as evaluative material and will not be disclosed to me.</p> Signature: Date:																											
General	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 70%;">Are you prepared to work shifts if required to do so?</td> <td style="width: 30%;">Yes/No</td> </tr> <tr> <td>Have you worked shifts before?</td> <td>Yes/No</td> </tr> <tr> <td>Are you prepared to work overtime if required?</td> <td>Yes/No</td> </tr> <tr> <td>Have you been convicted of a criminal offence?</td> <td>Yes/No</td> </tr> <tr> <td>Have you been the subject of a Diversion ordered by the Courts?</td> <td>Yes/No</td> </tr> <tr> <td>Are you awaiting the hearing of charges in a civil or criminal Court of Law?</td> <td>Yes/No</td> </tr> <tr> <td>Are you prepared to handle all products, materials, or equipment used in the industry?</td> <td>Yes/No</td> </tr> <tr> <td>Do you have a current drivers licence?</td> <td>Yes/No</td> </tr> <tr> <td>If yes, what class?</td> <td></td> </tr> <tr> <td>Drivers Licence No:</td> <td></td> </tr> <tr> <td>Do you have any dermerit points or endorsements?</td> <td>Yes/No</td> </tr> <tr> <td>Do you have any cases pending?</td> <td>Yes/No</td> </tr> <tr> <td>If yes, please detail:</td> <td></td> </tr> </table>	Are you prepared to work shifts if required to do so?	Yes/No	Have you worked shifts before?	Yes/No	Are you prepared to work overtime if required?	Yes/No	Have you been convicted of a criminal offence?	Yes/No	Have you been the subject of a Diversion ordered by the Courts?	Yes/No	Are you awaiting the hearing of charges in a civil or criminal Court of Law?	Yes/No	Are you prepared to handle all products, materials, or equipment used in the industry?	Yes/No	Do you have a current drivers licence?	Yes/No	If yes, what class?		Drivers Licence No:		Do you have any dermerit points or endorsements?	Yes/No	Do you have any cases pending?	Yes/No	If yes, please detail:	
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<p>Do you have a spouse, partner, relative or household-member working here or elsewhere in the industry? Yes/No</p> <p>If yes, who?</p>	
<p>What transport arrangements do you have to attend your place of employment?</p> <p>What are your interest/hobbies/sports/clubs/or community activities?</p>	
<p>Medical</p>	<p>If you are offered employment the offer is made subject to your obtaining a full medical clearance following the completion of our pre-employment medical.</p> <p>Do you agree to undergo a medical examination? Yes/No</p> <p>Do you consent to any biological monitoring if applicable to the job? (Refer HASE Act) Yes/No</p> <p>Have you had an injury or medical condition caused by gradual process, disease or infection for example hearing loss, sensitivity to chemicals, repetitive strain injuries that may be aggravated or further contributed to by the tasks of this job. Yes/No</p> <p>If yes, please detail:</p>
<p>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 Company in the future? Yes/No</p>	
<p>Declaration I, (full name) declare that to the best of my knowledge the information provided in this application and in any resume enclosed is accurate and I understand that if any false or misleading information is given, or any material fact suppressed, I will not be employed, or if I am employed, my employment will be terminated. I also understand that any false information given in relation to my medical history with regards to gradual process, disease or infection can result in my loss of entitlement for any compensation from ACC. [I further understand that any offer of employment if made is conditional on my obtaining a full medical clearance through the Company's pre-employment medical.]</p>	
<p>Signed: Date:</p>	

OFFICE USE ONLY

Interviewer's Comments:

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Signed: Date:

Reference Check:

Name of Referee:

Comments:

Re-employ?

Name of Referee:

Comments:

Re-employ?

Name of Referee:

Comments:

Re-employ?