EMPLOYMENT APPLICATION

JOB APPLICATION FORM			
Position Title:			
Please tell us how you heard about this vacancy:			
Last Name:		First Name:	
Address:			
Post Code:			
Telephone:	Home:	Daytime:	
Email address:			
Drivers Licence:	Do you have a clean driving licence valid in New Zealand?	Yes	No
	If yes, what type do you have?		

HEALTH DETAILS		
Do you suffer from any illness, injury or other disability which may be adversely affected by the requirements of this position or that may adversely affect your performance, regular attendance, personal safety or the safety of others?	Yes	No
If yes, please give brief details:		

CURRENT QUALIFCATIONS		
Qualification Title	Institution / Training Provider	Year completed
Please describe the skills you hold which are relevant to the position applied for (eg. for a typist – typing speed, word process capability, shorthand capability, etc):		

CONVICTIONS / DISQUALIFICATIONS		
To ensure the safety of clients / members you will also be required to undergo a criminal history check through the Department of Courts as part of the recruitment process. A criminal record will not necessarily be a bar to obtaining a position at the Kahungunu Executive. If a check is returned and reveals any information, this will be discussed with the applicant. The Team Co-ordinator, General Manager and Board of Management will make a decision as to whether the Offer of Employment should be withdrawn.		
Have you ever been convicted of any criminal offence or serious traffic offence, which would not be withheld under the Criminal Records (Clean Slate) Act?	Yes	No
If yes, please give brief details:		
Are you awaiting the hearing of charges for a criminal or serious traffic offence in a civil or criminal court of law?	Yes	No
If yes, please give brief details:		

REFEREES			
Please give the details for three references.			
Do you agree to have referees contacted in relation to this application?		Yes	No
Reference checks will be conducted legally in an ethical manner and all information derived will remain confidential.			
Name of Referee One and relationship to you:			
Address:			
Post Code:			
Telephone:	Daytime:	Mobile:	
Email address:			
Name of Referee Two and relationship to you:			
Address:			
Post Code:			
Telephone:	Daytime:	Mobile:	
Email address:			
Name of Referee Three and relationship to you:			
Address:			
Post Code:			
Telephone:	Daytime:	Mobile:	
Email address:			

DECLARATION			
▪ I declare that, to the best of my knowledge, the information given is true and correct. ▪ I understand that inaccurate, misleading or untrue statements or knowingly withheld information may result in termination of employment with this organisation. ▪ I understand that this application does not constitute an offer of employment. ▪ I understand that, in some cases, police and credit checks will be required and I will be notified if this applies to this application.			
Signed:		Date:	

EMPLOYMENT APPLICATION CHECKLIST		
Employment Application form completed, signed and dated.	Yes	No
Covering Letter	Yes	No
Copy of your Curriculum Vitae	Yes	No

Please return your Employment Application to:

Kahungunu Executive, 65 Queen Street, PO Box 79, WAIROA 4160
Telephone: (06) 838 6835 Fax: (06) 838 7290 E-mail: kahu-exec@xtra.co.nz