



Job Application Form

This position is subject to the standard 90 day trial period. At any time before the end of the trial period, and at our sole discretion, we can provide you with notice that your employment will terminate before or after the end of the trial period without providing a reason, and you will not be entitled to bring a personal grievance or other legal proceedings in respect of the dismissal.

Position applied for: _____

PERSONAL DETAILS

Name: _____
(surname) (first name)

Date of Birth: _____

Preferred Title: please circle (optional) Mr Mrs Miss Ms Other

Postal Address: _____

Telephone: _____
(private) (business) (mobile)

Email Address: _____

PLEASE attach a copy of your covering letter, Curriculum Vitae (CV) and any written references'. If you do not have a CV please attach a summary of your experience, including things you have done (paid or unpaid) that may be relevant to the position.

EDUCATION AND TRAINING

Qualifications completed:

Certificate/Degree/Diploma	School/College/University	Year Completed

HOW DID YOU FIND OUT ABOUT THIS VACANCY?

- WDC Noticeboard Word of Mouth Newspaper
 WDC Website Professional Magazine Waimate Advertiser
 Other (please specify) _____

PRESENT EMPLOYMENT

Name of Employer: _____
Address: _____ Phone No: _____
Position Held: _____ Since: _____
Present Salary: _____

PAST EMPLOYMENT

Include all positions held in the last 5 years, **beginning with the most recent**, including periods of unemployment, travel or full time study.

Company / Organisation	Position Held	From	To

Can we contact your current or most recent employer? Yes No

Please provide contact details:

Name: _____ Phone: _____

Relationship to you: _____

REFEREES

Please list names and contact details of additional people who can be contacted for a recent work reference. At least one should be a Supervisor, Team Leader or Manager whom you have worked for.

Name: _____	Relationship: _____
Address: _____	Position : _____
_____	Phone: _____
Name: _____	Relationship: _____
Address: _____	Position : _____
_____	Phone: _____

HEALTH

In accordance with our requirements under the Accident Insurance Act, and the Health and Safety in Employment Act, and our desire to ensure our workplace is safe, please complete the following question.

Do you have any current condition, past medical history, or claims to ACC which may affect your ability to carry out the duties of the position applied for?

Please tick one box No: Yes: If yes, please attach details

Note: External applicants may be required to have a pre-employment health assessment at Council's expense.

CRIMINAL CONVICTIONS

As you are applying for a position that requires a high level of trust and confidence, please answer the following questions *.

Have you ever had any convictions within the last 7 years?

Please tick one box **No:** **Yes:** **If yes, please attach details**

Have you ever been sentenced to a custodial sentence (e.g. imprisonment, corrective training, borstal)?

Please tick one box **No:** **Yes:** **If yes, please attach details**

Have you ever been ordered by a Court during a criminal case to be detained in a hospital due to your mental condition, instead of being sentenced?

Please tick one box **No:** **Yes:** **If yes, please attach details**

Have you ever been convicted of a "specified offence" as defined by Section 4 of the Criminal Records (Clean Slate Act) 2004 and includes sexual offending against children and young people or the mentally impaired, indecent assault, and may include an attempt to commit a conspiracy or being an accessory after the fact, in relation to the offence?

Please tick one box **No:** **Yes:** **If yes, please attach details**

Have you any outstanding fines, reparations or costs ordered by the Court in a criminal case?

Please tick one box **No:** **Yes:** **If yes, please attach details**

Have you ever been indefinitely disqualified from driving under Section 65 Land Transport Act 1998 or earlier equivalent provision?

Please tick one box **No:** **Yes:** **If yes, please attach details**

Have any charges been laid against you or are you the subject of any pending criminal proceedings?

Please tick one box **No:** **Yes:** **If yes, please attach details**

* please be aware that you are not obliged to declare certain offences which occurred more than 7 years ago under the Criminal Records Clean Slate Act 2004. If you have any doubts, please seek legal advice before completing these questions.

DRIVERS LICENCE

Do you hold a current Drivers Licence?

Please tick one box **No:** **Yes:**

Please list the classes, endorsement, conditions and expiry dates listed on your drivers licence. These are shown in section 4b, 7, 8 and 9 on your licence (e.g. automatic car only, learners licence, required corrective lenses etc).

EMPLOYMENT

Have you ever been dismissed from a previous role for a disciplinary reason?

Please tick one box No: Yes: If yes, please attach details

Have you ever instigated a personal grievance case against any employer?

Please tick one box No: Yes: If yes, please attach details

ELIGIBILITY TO WORK IN NEW ZEALAND

Please indicate your legal status to work in New Zealand:

New Zealand Citizen No: Yes:
New Zealand Resident No: Yes: If yes, please attach details
Overseas Resident No: Yes: If yes, please attach details

GENERAL

Do you know anyone that works for the Council? If so who? _____

Do you have a friend or relation that works for the Council? If so who? _____

If you are not a current employee of the Waimate District Council, have you previously worked for the Waimate District Council?

Please tick one box No: Yes: If yes, please attach details if not already included in your CV

DECLARATION

I _____ (full name) declare that to the best of my knowledge, the answers to the questions in this application and any other information supplied is correct. I understand that if any false, or deliberately misleading information is given, or any material fact omitted, my application may not be successful, or if I am subsequently employed, that I may be dismissed.

PRIVACY ACT PROVISIONS

Under the provisions of the Privacy Act, I authorise the Council to seek verbal or written information about me from my nominated referees (if given). I understand that the information received from the nominated referees by the Council is supplied in confidence as evaluative material and, pursuant to the Privacy Act 1993, will be kept confidential. The Waimate District Council will retain my details on this application form unless I request otherwise.

I authorise the Human Resources Manager to make available the information about me contained in this application form to other units of the Council for employment purposes only.

Yes No

PLEASE SIGN BELOW AS HAVING READ, UNDERSTOOD AND AGREED TO THE PROVISIONS OF THIS APPLICATION FORM.

SIGNED: _____ DATE: _____

PLEASE ATTACH DOCUMENTS TO SUPPORT YOUR APPLICATION