



ASHBURTON DISTRICT COUNCIL

Employment Application Form

CONFIDENTIAL To be completed personally by applicant

This Application Form and your CV are sources of information which will assist the Council in considering your suitability for the position for which you are applying. Failure to supply the information requested would prejudice the Council's ability to assess your suitability for the position and any subsequent chances in employment with the Council.

POSITION APPLIED FOR _____

LOCATION _____ **Date** _____

NAME: (MR, MRS, MISS, MS)

GIVEN NAMES: _____ SURNAME: _____

ADDRESS: _____

CONTACT NUMBERS: HOME: _____ MOBILE: _____

GENERAL

Do you hold a current Driver's Licence Yes No

Class(es): _____

Are you legally entitled to work in New Zealand? Yes No

If yes, under what circumstances:

New Zealand Citizen/Resident

Australian Citizen

Work Permit

Work Permit Expiry Date: _____

If you are not a New Zealand Citizen, it will be necessary to produce your passport to verify your entitlement to work & a copy will be retained on your personal file if successful.

If successful, what is the duration of your notice period to your present employer? _____

Have you been convicted of a criminal offence in the last 7 years? Yes No

Are you awaiting trial for a criminal offence? Yes No

Have you ever been sentenced to a custodial sentence? Yes No

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

OCCUPATIONAL HEALTH & SAFETY

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

If yes, please provide details: _____

If yes, what was your last date of treatment for the injury or illness? _____

REFEREES

At the short listed interview stage, applicants will be asked to provide names & contact phone numbers of up to three people who can act as referees and provide information for the purposes of ascertaining the suitability of the applicant for the position in question. All information received by Ashburton District Council is supplied in confidence as evaluative material and will not be disclosed to the applicant.

DECLARATION

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

I understand that any misinformation given in the Occupational Health & Safety section may result in my claim being ineligible for work-related accident compensation.

I understand that if I am offered a position, it will be provisional until such time as original documentation evidencing experience, qualifications, and entitlement to work etc is produced.

PRIVACY ACT PROVISIONS

I authorise the Ashburton District Council management to make available the information about me contained in this application form to other departments of the Council for employment purposes only.

SIGNATURE _____ **DATE** _____