

# APPLICATION FOR EMPLOYMENT – CHRISTMAS CASUAL

## Personal Details

Store:	
First name(s):	
Last name:	
Current address:	
Post code:	
Contact phone number:	
Email address:	

## Current occupation

*(Please tick the option that applies to you)*

Student	Casual worker	Part-time worker	Full-time worker	Other
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Business/School name: \_\_\_\_\_

Location: \_\_\_\_\_

Other relevant details:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

## Employment History

*Please fill out the employment history section with your most recent/current job first. Please fill out the following details for your next most recent position. Please note we will require full reference checks.*

Employer/Name of business	
Address	
Dates	From:                      To:
Position held	
Reason for leaving	
Rate of pay	

Employer/Name of business	
Address	
Dates	From:                      To:
Position held	
Reason for leaving	
Rate of pay	

## Referees

(Please provide references from your latest employer and at least one previous employer)

Name	
Job Title	
Company	
Phone	

Name	
Job Title	
Company	
Phone	

## General Information

(Please tick the option that applies to you)

Q1. Are you a New Zealand citizen?

Yes	No
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Q2. If not, do you have the right to work in New Zealand?

Yes	No
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Q3. Do you have a work permit?

Yes	No
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If yes, when does it expire? \_\_\_\_\_

Q4. Have you ever been convicted of a criminal offence?

Yes	No
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If so, give brief details: \_\_\_\_\_

Q5. Have you ever been arrested or tried for a criminal offence, had a criminal conviction, or are you currently before the court or awaiting a hearing or outcome?

Yes	No
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If so, give brief details: \_\_\_\_\_

Q6. Have you ever been dismissed from any previous employment?

Yes	No
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If so, give brief details: \_\_\_\_\_

Q7. Have you ever been the subject of an accusation and/or investigation for dishonesty by a previous employer?

Yes	No
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If so, give brief details: \_\_\_\_\_

Q8. How many days have you missed from work/school over the past year other than approved holiday/sick/disability leave? \_\_\_\_\_

Q9. How many days have you been late to work/school over the past year other than approved holiday/sick/disability leave? \_\_\_\_\_

Q10. What transportation arrangements do you have to attend your place of work?  
\_\_\_\_\_

Q11. Do you know any person currently employed by this company?

Yes	No
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If so, give brief details: \_\_\_\_\_

Q12. If you are offered a position, when is the earliest you could commence?  
\_\_\_\_\_

Q13. What is the minimum hourly rate you will accept? \_\_\_\_\_

Q14. What days are you available to work? *(Please tick the days that you are available for)*

Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday

Q15. Are you willing and able to work the following days?

23 <sup>rd</sup> December	Christmas Eve	Boxing day	New Year's Eve	New Year's Day	2 <sup>nd</sup> January

Q16. What is your level of skate hardware knowledge? *(Please tick the option that applies to you)*

None	Basic	Confident	Experienced
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Q17. What is your level of surf hardware knowledge? *(Please tick the option that applies to you)*

None	Basic	Confident	Experienced
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Q18. How comfortable to you feel greeting and conversing with customers? *(Please tick the option that applies to you)*

1	2	3	4	5
Not Comfortable			Very Comfortable	

## Medical Information

*(Please tick the option that applies to you)*

Q1. Have you ever suffered from an injury at work that required you to take time off?

Yes	No
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If so, give brief details: \_\_\_\_\_

Q2. Do you have any illness or injury that might prevent you from performing your work?

Yes	No
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If so, give brief details: \_\_\_\_\_

Q3. Are there any special services or facilities we need to provide to enable you to carry out the work duties?

Yes	No
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If so, give brief details: \_\_\_\_\_

Q4. Have you ever taken more than 5 days absence due to your own illness in the last 12 months?

Yes	No
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Q5. Do you smoke or vape?

Yes	No
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**Declaration:**

I declare that the information provided in my job Application Form is to the best of my knowledge a true and correct record. I consent to the company seeking verbal or written information on a confidential basis about me, from representatives of my previous employers and/or referees, and I authorise the information sought to be used by the company for the purpose of ascertaining my suitability for the position for which I am applying.

I authorise this company, if applicable, to request a copy of my credit and qualifications record, motor vehicle driving record, and any other investigative report deemed necessary through various third party sources. I will be notified as to the nature and scope of such investigations. I hereby agree if required, to submit to any drug/alcohol test required of me. I understand that the information received by the company is supplied in confidence as evaluative material and will not be disclosed to me.

Have you read the Job Position Description?

Yes	No
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*Applicant's signature:* \_\_\_\_\_

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