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Employment Application

Attached is an application form for employment which you are requested to personally complete. This form is a source of information which will be used by to assist in considering your suitability to the position for which you are applying. If successful, such information shall form part of Te Puia's records.

Date of Application:				
Position applied for:				
Given Names:				
Surname:				
Known by any other names:				
Address:				
Talaskasa Makilas				
Telephone: Mobile:			Home:	
Shirt size:	Pants Size:		Email:	
Drivers Licence:			Version:	
Classes:			DOB:	

Employment History

Present or most recent Employer first

Previous Employer			
Position Held			
Address			
Reason for Leaving			
Length of Service	From:	To:	
Previous Employer			
Position Held			
Address			
Reason for Leaving			
Length of Service	From:	To:	

Referees

Give name, email address, and telephone numbers of at least two work referees. At least one referee should be able to report on your recent employment history.

Full Name	Position	Email address	Phone Number

Disabilities / Medical Conditions (related to your ability to perform this role):

Criminal Convictions:

Do you have any previous criminal convictions that are not covered under the Clean Slate Act: If so, what were they and when?

Acknowledgement: Please read carefully and ensure you understand the following before signing

- 0 I am legally entitled to work in New Zealand
- O I have never been convicted of any criminal offence in a New Zealand Court, including fines, except for convictions that may be protected under the Clean Slate Act?

- O I confirm the above details are correct and authorise the company to make any such enquiries of me as they see fit in this application for employment, and thereafter during any employment that may be offered by the company.
- O I understand that this information will be held by the company in accordance with the Privacy Act 2020 and that I have the right to access my personal information at any time and request that any incorrect information be amended.
- O If my employment is contingent on me holding a current driver's licence, I understand that my driver licence details may be loaded into a secure database for the purpose of confirming driver licence details, licence status and demerit points and that any changes will be advised to the company, and my employment may be terminated at the company's sole discretion if I am disqualified from driving for whatever reason.
- O I understand that the company may be unable to offer me employment if I choose not to enter any work history, references, or my COVID-19 vaccination status.
- O I understand the company may require a pre-employment drug test and that I may be subjected to a drug and/or alcohol test at any time thereafter in accordance with the company's health and safety policy.
- O I confirm that I have divulged all details of any adverse medical history and/or previous ACC claims or treatments that would reasonably be classified as preexisting conditions that may preclude any similar claims against the company.
- O I understand that any false or misleading information or material fact suppressed may result in my employment being terminated or my offer of employment being revoked without question.

Signed: _____ Date: _____

If your application is accepted, when could you commence employment?