

WAIKITE VALLEY THERMAL POOLS

Application for Employment

The information you provide, along with the personal interview and other recruitment tools, will be used to assist in ascertaining your suitability for the position you are applying for.

Position Details

Position Applied for: _____

Personal Details

Surname: _____ First Name(s): _____

Contact/postal Address: _____

Contact Telephone Number(s): _____

Contact Email Address: _____

Are you a NZ Citizen or Resident? _____

If not, on what basis are you legally entitled to work in New Zealand?

Do you **have** any disability, health or medical condition that may effect your ability to perform the work duties for the position you are applying? **Yes/No**

If yes, please provide detail (including what reasonable accommodation you would require to perform the tasks): _____

Have you **had** an injury or medical condition caused by gradual process, disease, or infection (*ie Hearing loss, RSI, OOS, back injury/strain etc*) which the duties for the position you are seeking may aggravate or contribute to? **Yes/No**

If yes, please provide details: _____

Have you ever had your employment (temporary, permanent or contract) terminated for breach of company policy? **Yes/No**

If yes, please provide details: _____

Have you been convicted of a criminal offence where the maximum penalty is imprisonment?

Yes/No

If yes, please provide details: _____

Do you hold a current drivers licence? **Yes/No** # _____

Do you have any objection to receiving updates of employment opportunities?

Yes/No

Referees

Please supply the name and contact telephone number of at least two work related referees

Name: _____

Position / company: _____

Telephone Number: _____

Name: _____

Position / company: _____

Telephone Number: _____

Name: _____

Position / company: _____

Telephone Number: _____

I _____, consent to the above referees providing information on my previous roles, duties performed and of my performance in previous position held. I further consent to confirmation of academic qualifications being obtained from the institute the qualification was awarded.

Signed: _____ Date: _____

Declaration

I _____ (full name) declare that the information contained in this application for employment was given voluntarily and is accurate, complete and not misleading.

Signed: _____ Date: _____

Please post or fax this application with your Curriculum Vitae to:
Waikite Valley Thermal Pools, Waikite Valley, RD1, Rotorua
Fax 07 333 1861