

APPLICATION FOR EMPLOYMENT FORM

Confidential: Application for Employment

Kia ora, welcome and thank you for your interest in a role with our Organisation. This application assists us to assess your suitability for the advertised position. Please ensure that you fill this out on your own account and **complete all sections** of this application form **in full**. In addition to this application form, please also provide your current Curriculum Vitae (CV), a covering letter explaining why you wish to work for us and scanned copies of any relevant qualifications essential to the role you are applying for. Note: The completion of this form does not indicate that our Organisation is obliged to employ the applicant.

Your completed application form, and all information provided during the recruitment process will be kept in our confidential files for no longer than a year. You have a right of access to personal information in this form and to seek correction you believe is necessary for accuracy. Your information will be held at: Anglican Centre, cnr Raffles and Bower Streets, P O Box 227, Napier

The above information is provided in accordance with the Privacy Act 1993.

What position are you applying for?

What is it about the nature of our organisation that attracts you?

What experience have you had in similar faith based organisations?								
Personal Info	Personal Information – please print in block letters							
First Names				Su	ırname			
Preferred Name					nown by any other ames?			
Address:								
					_			
Phone:	Home:			Work:			Mobile:	
Email:								
(A copy of your Bir	A copy of your Birth Certificate or Passport may be required if employment is offered to you)							

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HRFOR002	Manager People & Culture	05/2018	05/2021	1.0



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Work Status								
Are you a New Zealand Citizen?					Yes		No	
Do you have the right of permanent i	residence	in New Zealand?			Yes	Т	No	
Do you have a work permit?					Yes		No	
You will be required to provide evide	ence of yo	our entitlement to work in	NZ (i.e. production	of a work pe	ermit or	resid	ency pap	ers)
Education								
Name of School/Technical	Institute/	Dates Attended						
University, etc.		From	То	Qualifica	tions O	btaine	d	
Occupational Qualifications	and E	xperience						
Do you have any qualifications relevar	nt to the p	osition for which you are a	pplying	Y	'es		No	
If so, give details								
								ı
Please describe any knowledge/skills a	and experi	ience you possess which ma	ay be relevant to the	e position for	which	you ar	e applyin	ıg
If so, give details								
What computer skills do you have tha	t are relev	ant to the role you are app	olying for?					
Employment Record	finct	lude regions of omploye	and full	time a study	/5~ fu	-th-or		
List your current or most recent emplo employment records, please continue							be	
completed even if details are shown	on an atta	ached CV.						
Current/Past Employer								
Period Employed: Fr	rom:		To:					
Position:				-				

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Reporting to:							
Responsible for							
Reason for Leaving:							
Current/Past Employer							
Period Employed:	From:				То:		
Position:							
Reporting to:							
Responsible for							
Reason for Leaving:							
Current/Past Employer							
Period Employed:	From:				То:		
Position:							
Reporting to:							
Responsible for:							
Reason for Leaving:							
Have you ever worked for our organization before? (If yes, please provide location, dates and role)							
Do you have secondary employment? (If yes, please provide details of days and hours)							
Referees You are required to provide at leas	Referees You are required to provide at least two referees, preferably from your most recent employment and the Manager you reported to.						
Name of Person to Contact				tionship to you			Phone Number

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representatives of my prevascertaining my suitability	I consent to Anglican Care Waiapu or Anglican Diocese of Waiapu, seeking verbal or written information about me from representatives of my previous employers and/or referees and authorise the information sought to be released for the purposes of ascertaining my suitability for the position I am applying for. I understand that the information received by Anglican Care Waiapu or Anglican Diocese of Waiapu is supplied in confidence as evaluative information, and as such will not be disclosed to me.						
Signature		Date:					
Health Issues							
	ealth condition, receiving medical treatment and/our ability to effectively carry out the functions and		•	Yes	N	No	
If Yes, give details							
affect your ability to effect	Have you suffered any serious injury, illness or gradual process condition that may be aggravated or affect your ability to effectively carry out the physical requirements, functions and responsibilities of the position applied for (e.g., a previous back injury, carpel Tunnel, Tennis Elbow or other repetitive						
If Yes, give details							
Are you on any medication for?	n which may affect your performance in the position	on that you h	ave applied	Yes	N	No	
If Yes, give details							
Drivers Licence							
Do you hold a current full I	New Zealand Driving Licence?			Yes		No	
If Yes, Number:		Class:					
Expiry Date:		No. of Deme	erit Points:		_		
Has your Driver Licence be	en cancelled within the last five years?			Yes	1	No	
Is there any matter pendin	ng which could affect the status of your Driver Lice	nce?		Yes	1	No	
What transport arrangement	ents do you have to attend your potential place o	f employmer	nt?				
General							
Subject to the provision of a charge in a court of law?	the Criminal records (Clean Slate) Act 2004, have	e you ever be	en convicted of	Yes	ľ	No	
If Yes, give details							
Are you currently awaiting the hearing of any of any criminal or civil charges ? Yes No							
If Yes, give details							
Additional Informa		6:1 6					
• • • • • • • • • • • • • • • • • • • •	essful, do you consent to having your details held suitability of other vacancies that may arise if app		period of 6	Yes	N	No	

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If your application is successful, when could you start work?
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Dec	laration					
l,			(full name)			
1.	informati	nat the answers to the questions in the application are true and on requested within this application form is sought to establish rand that if I do not provide such information then this application	my suitability for the position that I am			
2.	 Authorise any screening processes that Anglican Care Waiapu or Anglican Diocese of Waiapu sees fit to exercise in considering this application. I understand this process may include employer references and checking of criminal and medical records. 					
3.	. Note that any offer of employment does not constitute an employment agreement until a separate agreement has been evidenced in writing and signed by Anglican Care Waiapu or Anglican Diocese of Waiapu and myself.					
4.	 Am not aware of any personal circumstance, medical condition or disability that would limit my ability to adequately perform the role for which I seek appointment. 					
5.	5. Accept that, should my application be successful, the foregoing information will form part of my contract of employment and falsification of any information is grounds for dismissal.					
6.						
Signa	ature	Date:				

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