



Ashhurst Engineering & Construction Co. (1989) Ltd

# EMPLOYMENT APPLICATION FORM

**Private and Confidential**

This form **must** be completed by the job applicant in his or her own handwriting.

# Position Applied For:

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## **Section 1 – Personal Information**

First Name(s): ..... Family Name: .....

If you are known by any other names please record here:

.....

Residential Address: .....

.....

Telephone Number: .....

Mobile Phone Number (if applicable): .....

E Mail Address (if applicable): .....

Date of Birth: .....

## **Section 2 – Education (Including Secondary & Tertiary and length of time attended)**

Name of education organisations attended (e.g school or training organisation) attended and highest qualification


### **Qualifications (including trades)/Standards of Achievement:**

1. ....

2. ....

3. ....

For other qualifications or formal attainments you consider relevant – list the issuing authority (e.g university) with the qualifications/standards achieved and years of attendance

1. ....

2. ....

3. ....

**Section 3 – Employment History**

Have you been previously employed by this company, or in this industry? Yes  No

If yes, ensure details are recorded in the space provided on this page.  
(Starting with the most recent employer, please list all previous employers and periods of employment on the next page – continue on the back of the page if necessary)

Name of Employer .....

Employer Address .....

Length of Service From..... To.....

Position Held .....

Nature of work .....

Reason for Leaving .....

Name of Employer .....

Employer Address .....

Length of Service From..... To.....

Position Held .....

Nature of work .....

Reason for Leaving .....

Name of Employer .....

Employer Address .....

Length of Service From..... To.....

Position Held .....

Nature of work .....

Reason for Leaving .....

**Section 4 – Referees**

Please give details of referees that you authorise to contact, preferably not less than two work-related

Name .....  
Address .....  
.....  
Telephone ..... Occupation/Position held .....

Name .....  
Address .....  
.....  
Telephone ..... Occupation/Position held .....

Name .....  
Address .....  
.....  
Telephone ..... Occupation/Position held .....

Name .....  
Address .....  
.....  
Telephone ..... Occupation/Position held .....

**Section 5 – General**

Do you agree to the company seeking information on a confidential basis about you from your referees, for the purpose of your suitability for the position you are applying for?

Present Employer: Yes  No

Past Employer/s: Yes  No

Any other person: Yes  No

Should you be employed, do you intend to engage in any other paid work whilst employed with this company? Yes  No

If yes please give details .....  
.....

Have you ever been charged with or convicted of a criminal offence, or placed on Police Diversion? (If yes, further information relevant to potential employment may be sought at any subsequent interview) Yes  No

Do you have or are you aware of any likely commitments, which may prevent you from attending your place of employment during company working hours or affect your ability for extra hours of work (e.g other work, special interests, education, sports) Yes  No

If yes give brief details.....  
.....

Are you a member of a Territorial Force unit or Volunteer Fire Brigade? Yes  No

Do you smoke at work? Yes  No

Are you prepared to abide by our work and safety rules? Yes  No

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

Have you worked shifts before? Yes  No

Are you prepared to work shifts? Yes  No

Are you prepared to work extra hours? Yes  No

Are you prepared to work school holidays? Yes  No

Are you prepared to work as and where directed? Yes  No

Do you have the right to permanent residence in New Zealand or a valid work permit? (evidence will be required to be sighted if you are subsequently interviewed for a position) Yes  No

Where did you hear about this vacancy? .....

**Section 6 – Occupational Health** (All questions must be answered)

Have you ever had an injury or medical condition by gradual process injury, disease or infection that may be aggravated by any tasks that you may be called upon to perform by this company?

- Lifting (medium to heavy weights)
  - Twisting
  - Stretching
  - Walking/standing on concrete floors
  - Turning
  - Bending
  - Working on /from ladders
- Yes  No

Have you ever suffered any back injury or back strain? Yes  No

Have you ever suffered from any over-use injuries e.g RSI or OOS? Yes  No

Do you have any other condition that may effect your ability to effectively carry out the functions and responsibilities of an employee? Yes  No

If you have answered yes to any of the above questions in this section, please give details

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How many days absence in your last 12 months employment were stated by you or a medical practitioner to be due to sickness, injury and/or accident?(Please circle one of the following)

- 0-2                      3-5                      6-10                      11-15                      16-20                      over 20 days

**Section 7 – Additional Information**

Do you have any additional information that you consider may assist you in seeking employment here? If so please list below or attach to this form (bearing in mind the declaration below)

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.....

.....

.....

**Section 8 – Declaration**

I, .....(job seekers full name)

hereby declare that the answers to the questions in this application are true and complete. I understand that if any false information is given deliberately, or any information suppressed, that I may not be accepted, or if I am employed, my employment will be terminated.

Date..... Job Seekers Signature .....