## Application Form

## Position Applying For

$\qquad$

## Personal Details

Surname: $\qquad$
First Names: $\qquad$

Residential Address: $\qquad$
$\qquad$
Postal Address:
(If different from above)

Phone Numbers:
Day $\qquad$ Evening $\qquad$

Are you legally entitled to work in New Zealand with either citizenship or residency?
Yes $\square$ No

If not, do you have a current work permit Yes
Give details: $\qquad$
(Evidence of legal entitlement to work in New Zealand will be required)

## Drivers Licence

Do you have a current clean drivers licence?
Yes $\square$ No
If yes please list classes of licence you hold: $\qquad$

Has your licence ever been cancelled by the court?
Yes $\square$ No
Are you awaiting hearing of any charges for driving offences?
Yes $\square$ No
$\square$

## Conviction

Have you ever been convicted of a criminal offence?
Yes $\square$ No
If yes, please give details: $\qquad$
$\qquad$

Are you awaiting the hearing of any charges?
Yes $\square$ No

(Comcare will require the successful candidate to agree to Police Vetting which provides a criminal history check and other relevant information)

## Health

Have you in the past or do you currently suffer from any health condition or disability that may affect your ability to effectively carry out the tasks and responsibilities of the position applied for?


If yes, please provide details: $\qquad$

Have you had an injury or medical condition(s) caused by gradual process injury, disease or infection that may be aggravated or further contributed to by the tasks of the position you have applied for?

$$
\text { Yes } \square \text { No } \square
$$

If yes, please provide details: $\qquad$

## Misconduct

In the last 7 years have you ever been disciplined or suspended or dismissed from any employment for misconduct or poor performance?

Yes $\square$ No
If yes, please provide details: $\qquad$

I confirm that, to the best of my knowledge, the information supplied on this form and any attached documents are accurate.

## Signature:

$\qquad$ Date: $\qquad$

