

# APPLICATION FOR EMPLOYMENT FORM

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***To be recognised as a leading provider of quality education, training and employment to the community and business***

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## **1. Application Information and Guidelines**

Congratulations on taking the first steps towards a potential career with Horowhenua Learning Centre (HLC). The information collected in this form is to assist us with understanding important job related information in your application to join our team. Please participate in the application process by noting the following information:

1. Complete all sections of the Application for Employment form yourself. If you do not complete this application in full, you may prejudice our ability to assess your suitability for the position.
2. Attach a Curriculum Vitae and a supporting letter of application. Ensure your CV provides evidence of your capabilities, skills, and qualifications relevant to the position as detailed in the Job Description.
3. Your Application for Employment form and any other information you provide in support of your application will be treated as confidential. If you are not successful this form will be destroyed three (3) months after the position is filled.
4. If your application is successful, this information will form part of the HLC Employment Records and the information contained in this form will be used for work related purposes.
5. Note that HLC normally use an e-mail address as a default contact method, so please ensure that the details provided in your application are correct.
6. If your application is successful, you will be required to submit original or certified copies of all documentation referred to in your application, such as driver licence, passport, visas, certificates, educational qualifications, etc.
7. For some vacancies you may be requested to provide consent to pre-employment drug testing, a security clearance and/or complete a health assessment as part of the application process.
8. Note that if you are not eligible to work in New Zealand, your application is unlikely to be considered for this role. Information about immigrating to New Zealand can be obtained by visiting the New Zealand Immigration Service website: [www.immigration.govt.nz](http://www.immigration.govt.nz). HLC will conduct verification of your Visa status for the purpose of determining work eligibility.
9. You will be advised in writing of the outcome of your application within 10 working days after the closing date of the vacancy.
10. You are entitled to access or correct your application forms upon request to the CEO at HLC. You will not have any access to evaluative material such as verbal references, interview evaluations, or psychometric assessments. Feedback with regards to assessment outcomes may be presented.

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## 2. VACANCY INFORMATION

Name of Position you have applied for:

How did you hear about this vacancy? Please choose all that apply.

Seek	TradeMe Jobs
Newspaper	HLC Website
Word of Mouth	Noticeboard
Other	

Closing date of position you have applied for:

Job Type Applying for:

Full Time	Part Time
Casual	

Have you ever been employed by HLC in the past?

Yes	No
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If you have answered yes to the previous question please provide details including dates, job title, and reason for leaving:

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## 3. PERSONAL INFORMATION

Surname/Family Name:

First Name(s):

Middle and Second Name:

Preferred Name:

Are you known by any other name? Please state:

Address: (Number and Street name, Suburb, City, Country, Postal Code):

Postal Address if different from above (PO Box Number, Suburb, City, Country, Postal Code):

Preferred e-mail Address

Preferred Contact Number 1:

Preferred Contact Number 2:

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Please state special requirements around contacting you or scheduling an interview in the near future, should you be short listed:

What was your legal age at your last birthday?

Over the age of 15

Over the age of 18

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#### 4. RIGHT TO WORK IN NEW ZEALAND

Are you a New Zealand Citizen?

Yes - go to section 5

No - go to next question

Do you have Permanent Residence Status?

Yes

No - go to next question

Visa Number:

Passport Number:

What is your Country of Citizenship:

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#### 5. DRIVER LICENCE

Which current New Zealand Driver Licence classification do you hold?

Full

Restricted

Learners

None

Driver Licence Number

Expiry Date:

Number of Demerit Points:

Has your Driver Licence been cancelled within the last five years?

Yes

No

Is there any matter pending which could affect the status of your Driver Licence:

Yes

No

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## 6. HEALTH AND SAFETY

The purpose of gathering the following information is to enable HLC to determine whether you have any medical condition, injury, or impairment which may affect your ability to perform the required work. It will also identify any areas where there could be a health and safety risk to yourself or others relating to a condition, previous injury, or impairment. Note: A prior gradual process or musculoskeletal injury may not prevent you from working at HLC although injury documentation may be requested.

Have you ever had significant time off work as a result of an illness, injury, or infection that may affect your ability to perform the job applied for?                      Yes                      No

If yes, please specify (including estimate of time off, year of occurrence, and reason):

Have you ever consulted a health professional for Occupational Overuse Syndrome (OOS) or a Repetitive Strain Injury (RSI)?                      Yes                      No

If yes, please specify:

Do you (or have you had) a medical or surgical condition, mental illness, diagnosis, or injury (including allergies, eyesight, or hearing difficulties) that could affect or aggravate, your ability to undertake the role you have applied for? This includes any condition that might affect you from attending work regularly.                      Yes                      No

If yes, please specify:

Are there any disability needs, which will require accommodation if you are successful with your application?                      Yes                      No

If yes, please explain:

Are you willing to undergo an examination by a Doctor, designated by HLC, at any time if required?                      Yes                      No

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## 7. CRIMINAL CONVICTIONS

**Note that under the Criminal Records (Clean Slate) Act 2004, you may only legally conceal/withhold a criminal offence providing all of the following are met:**

- **No convictions within the last 7 years.**
- **Never been sentenced to a custodial sentence (eg imprisonment, corrective training, borstal).**
- **Never been ordered by a Court during a criminal case to be detained in a hospital due to your mental condition, instead of being sentenced.**
- **Not been convicted of a "specified offence" (eg sexual offending against children and young persons or the mentally impaired).**
- **Paid in full any fine, reparation or costs ordered by the Court in a criminal case; or**
- **Never been indefinitely disqualified from driving under section 65 Land Transport Act 1998 or earlier equivalent provision.**

**Please note that the declaration of a minor offence does not mean that you will not be employed. However, the non-declaration of an offence that you are required to disclose will be seen as a misrepresentation of a criminal record and treated accordingly and may result in summary dismissal.**

**Answer the following questions based on the above criteria by selecting 'Yes' or 'No' :**

At least one of the criteria described applies to me, as detailed and dated below.                      Yes                      No

If yes, please explain here:

None of the criteria currently apply to me, but I do have criminal charges pending and/or am awaiting the hearing of charges in court which are dated and detailed below:                      Yes                      No

If yes, please explain here:

None of the criteria applies to me, nor do I have any convictions or criminal charges pending                      Yes

I understand that if I tick this box and it is discovered that I do have a criminal record which is not covered by the Criminal Records (Clean State) Act 2004, that my employment is in jeopardy and I may be dismissed without notice                      Yes



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## 9. EMPLOYMENT RECORD

Current/Past Employer:

Period Employed:

Position Title:

Reporting to:

Key Responsibilities:

Reason for leaving:

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Past Employer:

Period Employed:

Position Title:

Reporting to:

Key Responsibilities:

Reason for leaving:

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Past Employer:

Period Employed:

Position Title:

Reporting to:

Key Responsibilities:

Reason for leaving:

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Past Employer:

Period Employed:

Position Title:

Reporting to:

Key Responsibilities:

Reason for leaving:

Please describe any special achievements in your career:

*For further employment records, please ensure that these are stated in your CV*

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## 10. REFEREES

*HLC policy requires a reference check from your current employer. However, this check will not be performed if you are not the preferred candidate. In addition, we will offer a process of written consent before contacting your current employer.*

Name of person

Relationship to you

Contact Details

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## 11. GENERAL INFORMATION

What further skills do you have in support of this application:

If you have applied for a casual or part time job, what is your availability in terms of working hours and days:

If your application is successful when would you be able to commence employment:

What are your salary expectations for this position:

Please explain why you are interested in this position:

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## 12. DECLARATION

I acknowledge that I have read all the instruction information and guidelines.

I understand that the information I have supplied on this application form is to assess my suitability for employment with the Horowhenua Learning Centre.

I hereby authorise the Horowhenua Learning Centre to contact the aforementioned referees to obtain information about me in the form of personal and employment related references, in the event that I am short listed as a preferred candidate. I understand that I will not be provided with any evaluative information given to Horowhenua Learning Centre by the listed referees.

I understand that I could be requested to provide consent to pre-employment Health Checks and/or a Drug & Alcohol test as part of the assessment process. I understand that the results of these pre-employment checks may result in Horowhenua Learning Centre discontinuing with the selection process.

As part of this application, I understand and agree that a CV accuracy check, qualification check and criminal record check may be completed. In order for these checks to be completed I agree to provide my date of birth and to complete any other relevant information accurately.

I acknowledge that I have read, understood, and agree to the above conditions.

I declare that to the best of my knowledge, the answers to the questions in this application are correct. I understand that if any false information is given, or any material fact suppressed, I may not be accepted for employment, or if I am employed, I may be dismissed without notice.

**By typing your name in the space provided below, you are 'electronically signing' this form.**

**Name:**

**Date:**

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**Thank you for your application and Good Luck!**