

APPLICATION FORM

Complete all parts of this form, including signature and date of completion.

When submitting your application, please include a cover letter and current summary CV. Your CV should outline your qualifications, skills, previously held roles, experience and aspirations. You are welcome to include any other information to support your application for this role.

Which position are you applying for:			
Surname		First Name(s)	
Maiden name/previous surname (if applicable):			
Address:		Phone number (day)	
		Phone number (evening)	
		Cell phone:	
		Email:	

<p>1. Are you a New Zealand or Australian Citizen?</p> <p>If you are not a New Zealand or Australian Citizen:</p> <p>You have permission / or a visa to work in New Zealand?</p> <p>Expiry date of your permit/work visa <input type="text"/> / <input type="text"/> / <input type="text"/></p> <p>For your application to proceed, you must provide evidence of your citizenship, or residential status. For most this will be a passport, birth certificate, citizenship certificate, or any other photographic identification such as a NZ driver's licence.</p>	<p>Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p>Yes <input type="checkbox"/> No <input type="checkbox"/></p>
<p>2. Have you been convicted under a law over the past seven years, are you awaiting court proceedings against you (except minor offenses such as speeding or parking fines)?</p> <p><i>Please note:</i> your application will be withdrawn if you provide any false declarations about previous or impending convictions. When applying for this position, you must agree to a police check undertaken by the Ministry of Justice.</p> <p>If this section applies to you, please provide details:</p> <div style="border: 1px solid black; height: 30px; width: 100%; margin-top: 10px;"></div>	<p>Yes <input type="checkbox"/> No <input type="checkbox"/></p>

3. Have you had any previous accidents, disabilities, or illness that may affect your ability to carry out this role?

Yes No

Please note: it is important that our work space is compliant and safe for all staff. Your application will not be disqualified if you disclose a personal matter.

If this section applies to you, please provide details:

Qualification/s (if applicable)

Please outline your qualifications in the box below, ensuring all parts are completed. Evidence/copies of these qualifications may be requested as part of this process.

Qualification	Institutions	Date qualification was awarded/completed

Please provide the names, addresses and phone numbers of people whom you approve for Te Mātāwai to contact regarding your suitability for the role. We would like two people not from your current employment included.

Name	Contact Number
1	
2	
3	

Have you been referred by a Te Mātāwai staff member?		Name of who referred you	
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Privacy Act 1993

This personal information provided in this application form (excluding EEO statistical information) is collected to appraise your suitability for work with Te Mātāwai, it is also used to ensure our selection of you if our selection is contested by another candidate. If you have been dishonest in your provision of information in the application form, your application will not be validated, and in the event, you are selected as the preferred provider, this may be withdrawn. This information will be held in the staffing files of Te Mātāwai. The onus is on you to ensure the information you provide to Te Mātāwai, including amendments if applicable, are correct.

We will not disclose any information you have disclosed, to a third party, without your permission except for EEO statistical information or information we may be legally obliged to release. Unsuccessful applications will be destroyed after being held for three months.

Declaration

I authorise Te Mātāwai to collect personal information about me from the referees I have named above so that they may critique my suitability for employment with Te Mātāwai; I also authorise Te Mātāwai to discuss personal information for the purposes of making an informed decision about that (my suitability for employment).

I authorise the referees' names above, who hold information about me, to disclose that information to Te Mātāwai for the purposes of my suitability for work with Te Mātāwai.

I declare that I have read and understood the statements relating to the Privacy Act, and I understand my rights under the Privacy Act 1993. I confirm that the information I have provided is correct, and that no information has been withheld/not shared. Your typed name here constitutes your signature for this application. We will retain your email and application on our recruitment records.

Signature (typed/handwritten)		Date	
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