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## Application for Employment

POSITION APPLIED FOR:

### PERSONAL DETAILS

Surname:

First name(s):

Date of Birth:

Current Address:

Phone (home):

Phone (mobile):

Email:

### GENERAL

Are you a citizen of New Zealand? Yes / No

If no, do you have permanent residency? Yes / No

If no, what type of visa / work permit do you hold?  
Expiry date:

How long do you intend to stay in Queenstown?

Do you hold a current drivers licence? Yes / No

If so, where was it issued?

Do you have any driving offences? Yes / No

Do you have any criminal convictions? Yes / No

If yes, please provide details:

Are you currently appearing before the court for any matter? Yes / No

If yes, please provide details:

### MEDICAL

Have you ever suffered any injury resulting in you taking time off work? Yes / No

Have you ever had an injury or medical condition caused by gradual process, disease or infection - for example, hearing loss, sensitivity to chemicals, asthma, repetitive strain injuries, back injuries which the tasks of this job may aggravate or contribute to?

Yes / No

If you have answered 'yes' please provide details

How many days absence claimed due to sickness in you last 12 months of employment?  
(please circle one)

0 - 5

6 - 10

10 - 15

Over 16

PREVIOUS EMPLOYMENT				
		From	To	Reason for Leaving
Employer				
Address				
Position				
Employer				
Address				
Position				
Employer				
Address				
Position				

INDUSTRY OR JOB SPECIFIC QUALIFICATIONS (inc First Aid)	
Qualification	Date

AVAILABILITY							
	Mon	Tues	Wed	Thu	Fri	Sat	Sun
AM							
PM							

If your application is successful when are you able to start work? .....

REFERENCES (Please provide two referees)	
Name of referee	
Position and Company	
Relationship to applicant	
Phone number	
Name of referee	
Position and Company	
Relationship to applicant	
Phone number	

DECLARATION
I declare that to the best of my knowledge the information provided in this application, in any CV and during the recruitment process is accurate. I understand that if any false information is given, or any material fact suppressed, I will not be employed, or if I am employed, I may be dismissed.
Signature ..... Date .....