

Employment History

Present or Most Recent Employer

From Company _____
To Address _____
Job Held _____
Main Duties _____
No. of hours worked per week _____
Reason for leaving _____

For the purposes of compliance with the Privacy Act 1993, do you consent to Tauranga Canvas Co Ltd contacting your present employer, for the purposes of reference checking.
Yes/No _____

Next Most Recent Employer

From Company _____
To Address _____
Job Held _____
Main Duties _____
No. of hours worked per week _____
Reason for leaving _____

Next Most Recent Employer

From Company _____
To Address _____
Job Held _____
Main Duties _____
No. of hours worked per week _____
Reason for leaving _____

Referees

Give name, address and telephone numbers of at least two referees. (Preferably from where you have worked)

Name	Position	Address	Phone No.
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

MEDICAL

		Type
Do you agree to undergo a medical examination if required?	Yes or No	_____
Do you agree to undergo drug testing if required?	Yes or No	_____
Are you at present receiving medical treatment and/or medication?	Yes or No	_____
If yes, please detail _____		
Are you allergic to, or have any sensitivity to any substances or chemicals?	Yes or No	_____
Do you smoke?	Yes or No	_____
Have you ever suffered from a back injury requiring time off work?	Yes or No	_____
Have you any medical implants (e.g metal rods) or devices (eg. Pacemakers) (except for dental fillings & plates).	Yes or No	_____

State any serious injury or illness (including stress) you have suffered that may affect your ability to effectively carry out the functions and responsibilities of the position applied for _____

Do you have any other known condition which may affect your ability to effectively carry out the functions and responsibilities of the position applied for? Yes or No _____
If yes, please detail _____

GENERAL

Are you prepared to work shifts if required to do so?	Yes or No	_____
Do you have any criminal convictions, not including any concealed under the Criminal Records (Clean Slate) Act?	Yes or No	_____
Have you ever been the subject of a Diversion ordered by the courts?	Yes or No	_____
Are you awaiting the hearing of any criminal charges?	Yes or No	_____
If yes, please detail: _____		
Are you prepared to handle all products, materials or equipment used in this industry?	Yes or No	_____
Do you have a current drivers license?	Yes or No	_____
If yes, what class? _____		
Drivers License number _____		
Do you have any demerit points or endorsements?	Yes or No	_____
If yes, please detail: _____		
Do you have a current forklift license?	Yes or No	_____
What are your interest/hobbies/sports/clubs or community activities? _____ _____		

Machinery/Equipment Experience

Listed below is some of the machinery you might be required to operate should your application for employment with Tauranga Canvas Co Limited be successful. In order for the company to initially assess your experience and competence with the range of machinery it uses – please complete the table below.

Machinery/Equipment Type	Have you used this type of machinery in the past? Y/N	If yes –for how long? Years/Months	Do you have any documentation certifying such training/experience
Drills			
Industrial Sewing Machine			
Forklift			
Rivet Gun			
Huck Gun			
Drill Press			
Drop Saw			
Skill Saw			
Grinders			
Linishers			
Hot Gun / Knife			
Rope / Webbing Cutter			
Press Machine			
Gantry Crane			
Table Plotter			
High Frequency Welder			
Air Compressor / Air Lines			
Other (list)			

DECLARATION : I (Full Name) _____ declare that to the best of my knowledge the answers in this application are correct and I understand that if any false or deliberately misleading information is given, or any material fact suppressed, I will not be accepted, or if I am employed, my employment will be terminated. I also understand that any false information given in relation to my medical history may result in my loss of entitlement for any compensation from ACC.

Signed _____ Date _____