

APPLICATION FOR EMPLOYMENT

Note: The completion of this form does not indicate that there is any **obligation on the TAYLOR BROS TRANSPORT LTD to engage the applicant.**

PURPOSE

This information is collected for the purpose of assessing your suitability for employment at Taylor Bros Ltd which may include subsequent changes in employment with Taylor Bros Ltd.

Date _____

Position applied for _____

Mr Mrs Miss Ms

Your Name Surname _____

Given Names (underline name used) _____

Address: Number & Street _____

Suburb & Town _____

Contact: Home Phone No. _____ Mobile: _____

Work Phone No. _____

Email Details. _____

Legal work status Are you legally entitled to work in New Zealand? **Yes / No**

As:

A New Zealand Citizen **Yes / No**

A permanent resident **Yes / No**

A holder of a current work visa **Yes / No**

Education (including Tertiary where applicable)

Name of secondary school(s) attended _____ from _____ to: _____

Qualifications (School Certificate, University Entrance, NCEA) subjects

Qualifications

What qualifications/certificates/licences or courses do you have relevant to your duties with TAYLOR BROS TRANSPORT LTD?

Qualifications

Date awarded

Employment History

Present or Most Recent Employer

Dates employed: From _____ to: _____

Company _____

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 Taylor Bros Transport Limited contacting your present employer for the purposes of reference checking **Yes / No**

Next Most Recent Employer

Dates employed: From _____ to: _____

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

Next Most Recent Employer

Dates employed: From _____ to: _____

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

Do you have secondary employment? Yes / No

If yes, please give details: _____

Referees

Please give name, address and telephone numbers of at least two referees.

| Name | Position | Address | Contact numbers |
|------|----------|---------|-----------------|
| | | | |
| | | | |
| | | | |

I, _____ consent to the Company seeking verbal or written information on a confidential basis about me from representatives of my previous employers and/or referees and authorise the information sought to be released by them to the Company for the purposes of ascertaining my suitability for the position for which I am applying. I understand that the information received by the Company is supplied in confidence as evaluative material and will not be disclosed to me.

Signed: _____

Date _____

MEDICAL/ DRUGS

If you are offered employment, the offer may be made subject to you obtaining a full Medical clearance (by completion of a medical examination). Do you agree to this? **Yes / No**

Do you agree to undergo a pre-employment drugs & alcohol test **Yes / No**

Are you at present receiving medical treatment and/or medication? **Yes / No**

If yes, please detail _____

Note: The role requires employees to undertake their duties in a variety of environments, including construction, roadworks, factory and agricultural settings. Whilst Taylor Bros have accounted for significant health and safety hazards in these environments, and direct employees to carefully follow company & the site safety instructions, employees are likely to be exposed to noise, dust, fumes and other discomforts.

Are you allergic to, or have any sensitivity to any substances or chemicals? **Yes / No**

Do you require corrective lenses or contact lenses? **Yes / No**

Do you require hearing aids or devices? **Yes / No**

Have you ever suffered from a back injury requiring time off work? **Yes / No**

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

Do you have any other known condition which may affect your ability to effectively carry out the functions & responsibilities of the position applied for? **Yes / No**

If yes, please detail _____

GENERAL

Are you prepared to work shifts if required to do so? **Yes / No**

Do you have any criminal convictions, not including any concealed under the Criminal Records (Clean Slate) Act? **Yes / No**

Have you ever been the subject of a Diversion ordered by the courts? **Yes / No**

Do you have any legal proceedings against you pending? **Yes / No**

If yes, please give details _____

Do you have a current driver's license? **Yes / No**

If yes, what class? _____ Endorsements? _____

Driver's License number _____

Do you have any demerit points? **Yes / No**

If yes, please give details: _____

Do you have a spouse, partner or relative working elsewhere in the same industry? **Yes / No**

If yes, please give details _____

If your application is accepted, when could you commence employment? _____

Machinery/Equipment Experience

Listed below is some of the machinery you might be required to operate should your application for employment with Taylor Bros Transport Ltd be successful. 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? | If yes –for how long? Years/Months | Do you have any documentation certifying such training/experience |
|---------------------------------|--|---|--|
| Trucks | | | |
| Roller Spreader | | | |
| Dangerous Goods | | | |
| Loaders | | | |
| Forkhoist | | | |
| Digger | | | |
| | | | |
| | | | |

PRIVACY ACT CONSENT

Do you consent to the Company retaining the information contained in this application form for the purposes of considering your suitability for any other position which may arise with this Company in the future?

Yes / No

DECLARATION

I (Full Name) _____ declare that to the best of my knowledge the information provided in this application, and in any CV/resume enclosed is accurate, and I understand that if any false or misleading information is given, or any material fact suppressed, I will not be employed, or if I am employed, my employment may be terminated.

I further understand that any offer of employment, if made, is conditional on my obtaining a full medical clearance, including a negative result from a pre-employment drug and alcohol test.

Signed _____

Date: _____