



CHOW

Chow Employment Application

To be completed by the applicant. Please print clearly

Date of application ___/___/___

Position applied for

Preferred CHOW:

Tory St Woodward St

I am looking for

Full-time work Part-time work

Your Name

Preferred name:

Your Address Number & Street

Suburb _____

Home Ph _____

Mobile Ph _____

Email Address:

Date of birth ___/___/___

Are you a New Zealand Citizen or Resident? **YES NO**

What work permit/visa are do you have _____
expiry ___/___/___

SHIFT AVAILABILITY

| | 10am til 5pm | 5pm til late |
|------|-----------------|-----------------|
| Mon | | |
| Tues | | |
| Wed | | |
| Thur | | |
| Fri | | |
| Sat | | |
| Sun | | |



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Are you planning any holidays within the next 8 weeks? **YES NO**

If yes when & for how long?

If you got the job, when could you start work? _____

Current hourly pay rate (or salary):

\$ _____

Anticipated hourly pay rate (or salary)

\$ _____

Do you receive a Student Allowance

YES NO

QUALIFICATIONS

(please include year of completion)

University or Tech

High School _____

Other qualifications/ certificates/
licenses/ courses?

Trade qualifications?

Tell us why you want to work for Chow?

Have you ever worked for CHOW before? **YES NO**

If yes, when & where: _____

Do you know anyone who works or has worked for CHOW?

Who? _____

Do you have secondary employment?

YES NO

If yes, please give details:



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EMPLOYMENT HISTORY

___ (tick) Yes, in compliance with the Privacy Act 1993, I consent to the company contacting my present or most recent employer (whichever applicable) for the purposes of reference checking?

Present/Most Recent Employer

From: ___/___/___ Until: ___/___/___

Your Position: _____

Hours worked per week: _____

Address: _____

Main Duties: _____

Reason For Leaving _____

Next Most Recent Employer

From: ___/___/___ Until: ___/___/___

Your Position: _____

Hours worked per week: _____

Address: _____

Main Duties: _____

Reason For Leaving _____

WORK RELATED REFEREES

Their name _____

Relationship _____

Company _____

Their address: _____

Their phone:: _____

Their name _____

Relationship _____

Company _____

Their address: _____

Their phone:: _____

I (name) _____

on (date) ___/___/___ consent to Chow seeking information on a confidential basis about me from my previous employers &/or referees, for the purposes of ascertaining my suitability for the position I am applying for. I understand that the information received by the company is supplied in confidence & will not be disclosed to me.



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GENERAL

Are you prepared to work shifts if required to do so? **Y/N**

Have you been convicted of a criminal offence? **Y/N**

Are you awaiting the hearing of criminal charges in a civil or criminal court of law? **Y/N**

Do you have a current driver's license? **Y/N**

LEARNERS RESTRICTED FULL HEAVY MACHINERY

Do you know of any reason why you would need to take a significant number of days off from work **Y/N**
If yes, please give details: _____

Are you at receiving medical treatment &/ or medication? **Y/N**
If yes, please give details: _____

Are you allergic to, or have any sensitivity to any substances or chemicals? **Y/N**
If yes, please give details: _____

Do you have any impairment, physical or mental, that could interfere with your ability to perform the job for which you are applying? **Y/N**
If yes, please give details: _____

If there are any positions or types of positions, for which you should not be considered or work duties that you cannot perform for any reason? Please explain:

DECLARATION

I (full name) _____
declare that to the best of my knowledge the information supplied by me is correct. I understand that if there is any false, deliberately misleading or suppressed information, I may not be accepted for employment or, if I am employed my employment may be terminated. (tick) Yes, I understand that any false information given in relation to my medical history may result in my loss of entitlement for any compensation from Accident Compensation Corporation. (tick) Yes, I understand that this application will be used to assist the company in establishing my suitability for the position I am applying for, & if I am hired, for subsequent changes to my employment within the company. If this application is successful, this information will form part of the company's personnel records. (tick) If my application is unsuccessful please destroy this application form. (tick) Yes, I consent to the company retaining this application form for considering my suitability for any other position that may arise with this company in the future. (tick) Yes, I understand that the completion of this form does not oblige the company to employ me. The above information is provided in accordance with the Privacy Act 1993.

Signed: _____

Dated: ___/___/___