

PO Box 4, Methven
Mt Hutt Village, New Zealand
Phone/Fax 03 302 9049
E polly@methvenpubs.co.nz
W www.methvenpubs.co.nz

JOB APPLICATION FORM

Application to be completed in applicant's own handwriting - please print.

Position Applied For					
Work Required	Full time □ Days □	Part time □ Evenings □	Casual 🗆		
Please tick days available:	MonTues	WedThursFri	SatSun		
How many hours are you prepared to work per week: minimummaximum					
Length of employment required months OR full time all year round employment					
Personal Information					
Full Name					
Address					
Telephone: Home		Mobile			
Do you have a current drive	r's licence ? Yes [□ No □			
Class and number:					
Do you have your own trans	sport? Yes □ N	o 🗆			
Have you ever been on ACC?		Physical Particulars No □			
Have you ever suffered any tidisease, or infection?	type of personal ir Yes □	njury caused by a work No □	related gradual process,		
Have you ever had any cond injury, disease, or infection?		ly to contribute to a w No □	ork-related gradual process		
Have you ever had any serio work in this position?	us illness, operatio Yes □	on or accident, or cond No □	dition that could hamper you		
If yes, please specify					

Qualifications (Certificates	to be supplied)				
Have you been charged with any offences in the last 5 years? If 'yes', please provide details:					
Do you have <u>any</u> legal prod	eedings pending? If 'yes',	please provide	details:		
Have you been declined ce	rtification as a Crowd Con	troller (Door Se	curity)? Yes □ No □		
Sale and Supply of Alcohol person' status in terms of t terms of the Sale and Suppl	ne Gambling Act or been d	eclined a Gener	al Manager's Certificate in		
Do you have a General Ma Act? Yes □ No □ Pleas	nager's certificate for the performed in the performance of the performance in the perfor	ourposes of the	Sale and Supply of Alcoho		
Is your financial position a	nd credit rating sound? If	unsure, give par	ticulars.		
Are you legally entitled to	work in New Zealand?	Yes □	No □		
Do you have a work permi t Work permits or evidence of	•	-			
Please supply the names at Please provide last employe			erees_		
	yment Record: ALL prior po				
Last or Present Position			<u>-</u>		
<u>Employer</u>					
Nature of work	From _		То		
Duties performed		Speciality			
Hourly rate	how many hours a week were you working there?				

Reason for leaving		
Previous Employer		
Nature of work	From	To
Reason for leaving		
Previous Employer		
Nature of work	From	To
Reason for leaving		
Have you had experience with a	tab? Yes □ No □ and/or g	aming machines? Yes 🗆 No 🗆
Your strengths:		
Your weaknesses:		
Briefly describe how the pub can	benefit by having you as a	member of their team:
APPLICANT'S DECLARATION		
information contained herein for including conducting credit and contacting referees and previous information or if I have left of appointment. If I am appoint employment may be terminated	or the purpose of ascertain criminal record checks thro employers. I understand the ut any important informated before any inaccuracies ed. I understand that in offence under the Crimes sign an Employment Agreer	
Applicant's signature		Date: