

# Ruapehu District Council Job Application Form



This is an application for employment with the Ruapehu District Council. Should that application result in an employment arrangement it will form part of an Employment Agreement. It should therefore be completed by hand and signed by the applicant in person.

The application form is a source of information, which will assist Council in considering your suitability for the position for which you are applying. If successful in obtaining employment, such information requested will form part of the Council's personnel records.

Equal Opportunity - The Ruapehu District Council is an Equal Opportunity Employer, we hire, train and promote without regard to race, sex, colour, national or ethnic origin, sexual orientation, age, political opinion, employment status, disability, marital status or religious belief.

<b>What position are you applying for?</b>	
--------------------------------------------	--

Personal Information			
First Names		Surname	
Address:			
Phone:	Home: <input style="width: 150px;" type="text"/>	Work: <input style="width: 150px;" type="text"/>	Mobile: <input style="width: 100px;" type="text"/>
Email:	<input style="width: 700px;" type="text"/>		
<b>(A copy of your Birth Certificate may be required if employment is offered to you)</b>			

Are you a New Zealand Citizen?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
Do you have the right of permanent residence in New Zealand?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
<b>New Zealand Immigration Law requires you to answer the following questions:</b>				
Do you have a work permit?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
Do you have the right of permanent residence?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>

Education and Qualifications			
(Details may be shown on an attached Curriculum Vitae – <b>copies only</b> of certificates)			
Name of School/Technical Institute/ University, etc	Dates Attended		Qualifications Obtained
	From	To	
<input style="width: 95%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 95%;" type="text"/>
<input style="width: 95%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 95%;" type="text"/>
<input style="width: 95%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 95%;" type="text"/>
<input style="width: 95%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 95%;" type="text"/>

## Trade/Occupational Qualifications

(Details may be shown on attached Curriculum Vitae (**copies only of certificates**). Where appropriate, you may be required to produce original qualification documents.

Are you currently studying or planning to study for any qualification?	Yes	<input type="checkbox"/>	No <input type="checkbox"/>
If so, give details	<input type="text"/>		
Can you speak any languages other than English?	Yes	<input type="checkbox"/>	No <input type="checkbox"/>
If so, give details	<input type="text"/>		

## Employment Record

List your current or most recent employer first. Include periods of employment, travel and full-time study. (For further employment records, please continue on a separate sheet.) Details may be shown on an attached Curriculum Vitae.

Current/Past Employer	<input type="text"/>		
Period Employed:	From:	<input type="text"/>	To: <input type="text"/>
Position:	<input type="text"/>		
Reporting to:	<input type="text"/>		
Responsible for	<input type="text"/>		
Reason for Leaving:	<input type="text"/>		
<hr/>			
Current/Past Employer	<input type="text"/>		
Period Employed:	From:	<input type="text"/>	To: <input type="text"/>
Position:	<input type="text"/>		
Reporting to:	<input type="text"/>		
Responsible for	<input type="text"/>		
Reason for Leaving:	<input type="text"/>		
<hr/>			
Current/Past Employer	<input type="text"/>		
Period Employed:	From:	<input type="text"/>	To: <input type="text"/>
Position:	<input type="text"/>		
Reporting to:	<input type="text"/>		
Responsible for:	<input type="text"/>		
Reason for Leaving:	<input type="text"/>		

## Referees

Please try to name four people, at least two work related, who can provide a reference.

Name of Person to Contact	Association (Employer/Colleague/Neighbour/Friend)	Phone Number

I consent to Council seeking verbal or written information about me from representatives of my previous employers and/or referees and authorise the information sought to be released.

Signature

Date:

## Personal Interests/Hobbies

## Health Issues

If necessary you may be required to attend a Doctor nominated by Council. Any costs incurred will be met by Council.

Do you have any known health condition of any kind, which may affect your ability to effectively carry out the functions and responsibilities of the position applied for?

Yes

No

If Yes, give details

Have you suffered any injury or illness that may affect your ability to effectively carry out the physical requirements, functions and responsibilities of the position applied for (eg, a previous back injury or repetitive strain injury)?

Yes

No

If Yes, give details

Council has a Smoke-Free Workplace Policy, which means there is no smoking on the premises. Would this be a problem for you?

Yes

No

## Driving Licence

Do you hold a current full New Zealand Driving Licence?

Yes

No

If Yes, Number:

Class:

Expiry Date:

No. of Demerit Points:

Has your Driver Licence been cancelled within the last five years?

Yes

No

Is there any matter pending which could affect the status of your Driver Licence?

Yes

No

General			
Have you had any criminal convictions within the last five years?	Yes	<input type="checkbox"/>	No <input type="checkbox"/>
If Yes, give details	<input type="text"/>		
Are you currently awaiting the hearing of any criminal charges?	Yes	<input type="checkbox"/>	No <input type="checkbox"/>
Are you prepared to work overtime as and when required?	Yes	<input type="checkbox"/>	No <input type="checkbox"/>

Additional Information
Do you have any information which you consider may assist your application, eg, sporting achievements, interest and future aspirations? Please attach any additional information to this application. Enclose <b>copies only</b> of relevant qualifications and written references. All information will be treated as confidential.

If this application is unsuccessful, may Council consider this application for other similar vacancies that may occur, where appropriate?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
If your application is successful, when could you start work?	<input type="text"/>			

Declaration	
I, <input type="text"/>	(full name)
<ol style="list-style-type: none"> <li>1. Authorise any vetting processes that Council sees fit to exercise in considering this application. I understand this process may include Employer references, or checking of criminal, financial or medical records. I agree to co-operate in providing information to assist that vetting process</li> <li>2. Note that completion of this application does not oblige the Council to engage the applicant.</li> <li>3. Note that any offer of employment does not constitute an employment agreement until a separate agreement has been evidenced in writing and signed by the Ruapehu District Council and myself.</li> <li>4. Declare that the answers to the questions in the application are true and correct and understand that where a yes/no answer is left blank Council will assume the negative.</li> <li>5. Am not aware of any personal circumstance, medical condition or disability that would limit my ability to adequately perform the role for which I seek appointment.</li> <li>6. Accept that, should my application be successful, the foregoing information will form part of my contract of employment and falsification of information is grounds for dismissal.</li> </ol>	
Signature <input type="text"/>	Date: <input type="text"/>

**Please send completed Job Application Form and CV to**  
**Pauline Love**  
**Human Resources Officer**  
**Ruapehu District Council**  
**Private Bag 1001, TAUMARUNUI 3946**  
**Telephone (07) 895 8188 Fax: (07) 895 3256**  
**email: [paulinel@ruapehudc.govt.nz](mailto:paulinel@ruapehudc.govt.nz)**