

	FORM	EMPLOYMENT Application Form	Doc ID Revision No Issue Date	DC5110 1.0 9/06/2017
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APPLICATION FOR EMPLOYMENT

PLEASE PRINT

CONFIDENTIAL		To be completed personally by Applicant	
Date of Application.....			
POSITION APPLIED FOR		Surface	Underground (Circle which applies)
YOUR NAME			
<i>In block letters</i>			
Family Name:.....		Given Names (underline name used):.....	
YOUR CONTACT ADDRESS AND TELEPHONE NUMBERS			
Contact address.....		Mobile Phone No:..... Other No. (If any):.....	
DATE OF BIRTH/...../..... Must be aged 18+ to work on a NZ Mine Site			
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			
<i>Including Polytech, TAFE, further education. etc where applicable</i>			
Name of secondary school attended		
.....		
Qualifications (NCEA or equivalent) Subjects:			
.....		
.....		
Other Qualifications		Yes/No (Subjects)	
.....		
Do you hold any trade qualifications? (i.e. Trade cert, Advanced Trade Cert. Etc)			
QUALIFICATIONS			
Do you have any other qualifications/certificates/licences/or attend any courses? (give details).			
.....			
Please describe the skills you hold which are relevant to the position applied for.			
ADDITIONAL INFORMATION			
Alton Drilling Ltd are proactive with training and upskilling staff please let us know if you need assistance with any of the following (<i>please circle</i>)			
Writing		Reading	Numeracy
To help us help you, tell us which way you find it easiest to learn a new task (<i>Please circle one</i>)			
By demonstration		By verbal instruction	

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By Listening and taking notes By being actively involved

EMPLOYMENT HISTORY	<p>Present or Most Recent Employer</p> <p>Company.....</p> <p>Address.....</p> <p>Job Held.....</p> <p>Main Duties.....</p> <p>No of hours worked per week..... Length of service.....</p> <p>Reason for leaving.....</p> <p>For the purposes of compliance with the privacy act 1993 do you consent to the company contacting your present employer</p> <p>Next Most Recent Employer</p> <p>Company.....</p> <p>Address.....</p> <p>Job Held.....</p> <p>Main Duties.....</p> <p>No of hours worked per week..... Length of service.....</p> <p>Reason for leaving.....</p> <p>Next Most Recent Employer</p> <p>Company.....</p> <p>Address.....</p> <p>Job Held.....</p> <p>Main Duties.....</p> <p>No of hours worked per week..... Length of service.....</p> <p>Have you Ever worked for this Company or an associated company? Yes/No before?</p> <p>If yes where and when:</p> <p>Do you have secondary employment? Yes/No If yes please detail:</p>
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REFEREES Give name, address and telephone numbers of at least two referees

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

If your application is successful when could you commence employment:

This is necessary for the compliance with the Privacy act

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 and will not be disclosed to me.

Signature: Date.....

GENERAL

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

Have you worked shifts before? Yes/No

Are you willing & confident working in remote and bush sites? Yes/No

Do you have any present criminal convictions? Yes/No
(Not including any concealed under the Clean Slate Act.)

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

Are you awaiting the hearing of charges in a civil or criminal court of law? Yes/No

Are you prepared to handle all products, materials, or equipment used in the industry? Yes/No

Do you have a current driver's licence? Yes/No
Can you competently operate a Manual Vehicle? Yes/No

If yes what class?

Drivers Licence No:

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

If yes who?

Where?

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MEDICAL

If you are offered employment the offer may be made subject to your obtaining a full medical clearance (by completion of a medical examination) to assess your fitness for the job for which you are applying.

Do you consent to undergo a medical examination if you are offered employment Yes/No

Do you consent to any biological monitoring in accordance with the Health and Safety in Employment Act 1992 if applicable? Yes/No

Do you consent to releasing the latest 90 days your Medical & ACC records to our Medical Practitioner Team for review?
Yes / No

Do you have any health-related issues that may impact on your ability to perform the tasks listed in the Job Description and/or Task Analysis for the job that you are applying for? **Please disclose all.** (For example: Hearing loss, Repertory difficulties, Back and/or any other sprains or weakness, Fear of enclosed places, Visual impairment, Epilepsy or Diabetes)

If yes, please detail:
.....
.....

PRIVACY ACT CONSENT

Do you consent to the Company retaining the information contained in the 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 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 conditional on my obtaining a full medical clearance

Signed:..... Date:

Note: The completion of this form does not indicate that there is any obligation on the Company to engage the applicant

Purpose: This information is collected for the purpose of assessing your suitability for employment at Alton Drilling which may include subsequent changes in employment with the company

Completed form may be emailed:
felicity@altondrilling.co.nz