



Employment Application Form

PART A: INFORMATION DISCLOSURE FORM

The completion of this form does not indicate that there is any obligation on TrailLite to engage the applicant. The Application Form is a source of information that will be used to consider your suitability for the position for which you are applying. If successful, such information will form part of the employer's personnel records. Failure to supply the information requested would prejudice our ability to assess your suitability for the position. This information is collected for the purpose of assessing your suitability for employment with the client which may include subsequent changes in employment with the Company.

Full Name:	
Role Applied for:	
Email:	
Location:	
Postal Address:	
Phone:	
What is your legal right to work in New Zealand?	<input type="checkbox"/> NZ/AU Citizen <input type="checkbox"/> NZ Permanent Resident <input type="checkbox"/> No Work Visa <input type="checkbox"/> Work Visa Type and Expiry Date:
Do you have a current driver licence?	<input type="checkbox"/> Yes – Full <input type="checkbox"/> Yes – Restricted <input type="checkbox"/> Yes – Learners <input type="checkbox"/> No
If yes, do you have any demerit points or endorsements?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you plan on taking any leave in the next 12 months? <input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, please provide details:



Criminal History

PLEASE NOTE: Trailite reserves the right to seek Ministry of Justice verification of your criminal history. If it is found that you have deliberately withheld information and if that information would have made a difference to the decision to employ, your employer may reserve the right to terminate your employment.

1. Do you have any criminal convictions, not including any concealed under the Clean Slate Act?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, please detail:	Conviction details and Relevant dates:
Are you awaiting the hearing of charges in a civil or criminal court of law?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, please detail	(Details and a date):

Medical

The following questions are designed to identify whether you have any pre-existing medical conditions or are suffering from any injuries or illnesses that may put your health and safety at risk in the workplace; risk the health and safety of other employees; or prevent you from fulfilling the requirements of your job role.

Have you had an injury or medical condition caused by gradual process, disease or infection, (e.g. hearing loss, sensitivity to chemicals, repetitive strain injuries) that may be aggravated or further contributed to by the tasks of this job?	<input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please provide details:
Is there a reason, medical or otherwise, that would impact on your ability to carry out the job you are applying for?	<input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please provide details:
Do you agree to undergo a medical examination as part of our pre-employment process?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do consent to undergoing a pre-employment drug and alcohol test? TRAILLITE will use the information arising from the Pre-employment Drug & Alcohol test for the purposes of confirming or declining my conditional offer of employment. In signing this	<input type="checkbox"/> Yes <input type="checkbox"/> No



form you consent to that information being made available to TrailLite.	
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General

Have you ever worked for TRAILLITE or an associated to Company before:	<input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please provide details:
Do you have a spouse, partner, relative or household member working for TRAILLITE?	<input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please provide details:
Do you have secondary employment?	<input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please provide details:
Are you prepared to work overtime if required?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Are you prepared to handle all industry products, materials or equipment?	<input type="checkbox"/> Yes <input type="checkbox"/> No
What transport arrangements do you have in order to attend your place of employment?	<input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please provide details:

Employment Screening

In accordance with the Privacy Act 1993, you are entitled to access this information upon request to TrailLite's Privacy Officer.

Do you consent to TrailLite Limited retaining the information contained in this application form for the purposes of considering your suitability for any other position which may arise with TrailLite in the future?	<input type="checkbox"/> Yes <input type="checkbox"/> No
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Referees:

Please provide the details of at least two work-related referees, one of whom should be your current/most recent employer. Your referees will not be contacted unless we obtain your express permission. The information received by TrailLite is supplied in confidence as evaluative material and will not be disclosed to you.

Referee One:	Name: Contact Details: The company that your referee works (or worked) for and their relationship to you:
Referee Two:	Name: Contact Details: The company that your referee works (or worked) for and their relationship to you:

I 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 terminated.

Signature:	
Date:	



PART B: SUPPLEMENTARY CANDIDATE APPLICATION Form

This form must be completed if you have not provided a current resume.

Education & Professional Qualifications

Detail your Qualifications. Include School Certificate, University Entrance and/or NCEA level	
Do you have any Professional Qualifications? Include all Certificates, Licences.	
Have you attended any courses where information hasn't already been supplied?	
Do you hold any other skills which are relevant to the position you are applying for? (eg. First Aid, Forkhoist operation, etc)	
Can you hold an everyday conversation in a language other than English?	<input type="checkbox"/> Yes <input type="checkbox"/> No Please supply details

Employment History

Present Employment or Most Recent Employment	
Company:	
Position held:	
Main duties:	
Hours worked per week:	Length of service:
Reason for Leaving:	



Next Most Recent Employment	
Company:	
Position held:	
Main duties:	
Hours worked per week:	Length of service:
Reason for Leaving:	
Next Most Recent Employment	
Company:	
Position held:	
Main duties:	
Hours worked per week:	Length of service:
Reason for Leaving:	

Declaration:

I, _____ (print full name) declare that to the best of my knowledge, the information provided in this Application and in any CV provided is correct, and I understand that if any false or misleading information is given, or any material suppressed, I will not be employed, or my employment will be terminated.