



**REGISTRATION**

*Please note: The completion of this form does not indicate any obligation on the company to employ the applicant.*

**PLEASE PRINT CLEARLY**

**PERSONAL DETAILS**

Title (Ms/Mrs/Miss/Mr) \_\_\_ Name \_\_\_\_\_ Date \_\_\_\_\_

Address \_\_\_\_\_

Home Phone No \_\_\_\_\_ Mobile No \_\_\_\_\_

Email \_\_\_\_\_

Date of Birth \_\_\_\_\_ Own Transport Yes/ No \_\_\_\_\_

Drivers Licence (please circle) Learners / Restricted / Full / Other (please state) \_\_\_\_\_

**OPTIONAL INFORMATION**

Marital Status \_\_\_\_\_ Dependents \_\_\_\_\_

Iwi Affiliations \_\_\_\_\_

**WORK DETAILS**

Hours you wish to work (please circle)      Full-time                      Part-time                      Temporary                      Weekends

Hourly rate/ salary you are expecting to earn? \$ \_\_\_\_\_ Is this negotiable? Yes / No

What type of work are you looking for? \_\_\_\_\_

Are you currently employed? Yes / No (if yes where) \_\_\_\_\_ Notice Period/Availability? \_\_\_\_\_

Would you be prepared to look for work outside of Whakatane? Yes / No

Which areas? (please circle)      Kawerau                      Edgumbe                      Opotiki                      Other \_\_\_\_\_

Have you recently applied for any other positions/ where? \_\_\_\_\_

**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 permit                      Yes/No

                                 Type of Visa \_\_\_\_\_ Passport Number \_\_\_\_\_ Expiry Date: \_\_\_\_\_

**MEDICAL**

Do you have any Medical Disabilities that may affect your working ability? Yes / No

(If yes clarify) \_\_\_\_\_

**GENERAL**

Do you have any criminal convictions, not including any concealed under the Criminal Records (Clean Slate) Act? Yes/No

If yes, please detail \_\_\_\_\_

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

Are you awaiting the hearing of any criminal charges? Yes/No

If yes, please detail \_\_\_\_\_

Are you willing to complete random Drug and Alcohol Screening? Yes/No

**PLEASE INDICATE LEVEL OF SKILLS AND EXPERIENCE YOU HAVE**

Highest tertiary qualification \_\_\_\_\_

Do you have a trade certificate – if yes please detail \_\_\_\_\_

<b>COMPUTER SKILLS</b> <i>please tick</i>		<b>Beginner</b>	<b>Intermediate</b>	<b>Advanced</b>
Microsoft Word	WPM <input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Mail Merge		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Tables		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Graphs		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Templates		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Formatting		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Data entry	KPH <input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Microsoft Excel		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Graphs/ Charts		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Formulae		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Tables		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Database maintenance		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Database creation		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Microsoft Publisher		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Microsoft Project		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Microsoft PowerPoint		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Web/ social media updates		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other software/ systems	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**EXPERIENCE** *please tick*

<b>Accounting</b>	Payroll Cash Flow Forecasting GST/ FBT/ PAYE	Assets/ Depreciation Creditors/ Debtors P & L	Reconciliations Trial Balance
<b>Accounting software</b>	MYOB Other _____	QuickBooks	Xero
<b>Administration</b>	Office Management Sole Charge Spreadsheets	Reception Filing	Minute taking Word Processing
<b>Retail</b>	Customer service Purchasing	Stock Control Supervisor – no. of Staff	Till/ EFTPOS Sales
<b>Management</b>	Budget Control (\$.....) Health and Safety	Human Resources	Direct Reports

**Other Work Experience** \_\_\_\_\_

**DECLARATION**

*(This Consent is a Necessary Privacy Act Compliance)*

I hereby confirm that the information given is true and correct; I consent to:

- my personal data being included on a database and its use to secure me employment/ temporary assignments/ contracts;
- my CV and other personal data being transferred to clients via electronic mail and I understand the risk of my CV being unintentionally altered during this process;
- references being passed onto potential employers;
- the checking of information collected with third parties or with other information held by Adcam Recruiting; and
- Adcam Recruiting passing information to certain third parties to present or detect crime, to protect public funds or in any other way permitted or required by law

Signed \_\_\_\_\_ Date \_\_\_\_\_