

APPLICATION FOR EMPLOYMENT

Your personal completion of this Application Form in full is a requirement for our recruitment and selection process. Please complete the boxes in full, do not write "Refer to CV" on application form. CV to be an attachment only. Please ensure that you are the person completing this form.

PURPOSE

This information will be used assist in the consideration of your suitability for the position for which you are applying and, if accepted, may be reviewed with regard to subsequent changes in employment with the Company. You should ensure that the information that you provide is entirely accurate. You should also err on the side of transparency – if you believe something could be relevant then please disclose it or check with us before omitting it. Failure to provide correct and full information may prejudice our ability to assess your suitability. The provision of false, inaccurate, or misleading information, or failure to disclose a material fact, may result in any offer of employment being withdrawn, summary dismissal or cancellation of your employment.

In accordance with the Privacy Act 2020, if you are successful in your application for employment, the following information shall form part of the Company's personnel records. The Company may also retain this information relating to unsuccessful applicants for a period of up to 12 months. You are entitled to access this information upon written request to the Business Owner.

All information you give to us will be treated confidentially and will only be released with your authorisation, or as required by law.

The completion of this form does not indicate that there is any obligation on E Hayes & Sons to employ you.

PERSONAL INFORMATION	
Date of application:	
Position applied for:	
Full name:	
(block letters please)	
Preferred name:	
Please list any other names under which you have been employed or educated.	
Home address:	
Length of time at this address:	yearsmonths
Mailing address:	
(if different from above)	
Home phone number:	()

Mobile phone number:	()
E-mail address:	
Are you of / beyond school leaving age?	Yes / No
LEGAL WORK STATUS	
Are you legally entitled to work in New Zealand? If so, as a:	Yes / No
New Zealand Citizen	
NZ Permanent Resident	
Holder of a current Work Permit	Expiry date: / /
Copy attached	Yes / No
Interests, hobbies, sports, clubs or community activities?	
Do you have any current criminal or driving convictions in New Zealand or any other country (not including any concealed under the Clean Slate Act) for any matter that could potentially be relevant to your employment at E Hayes? In particular, convictions involving any aspects of honesty, theft, money, fraud, forgery, drug or alcohol, assault, forgery or weapons? Under the Criminal Records (Clean Slate) Act 2004 you do not need to declare your New Zealand conviction if <u>all</u> of the following apply: (a) It has been 7 or more years since your last conviction, and you have not reoffended; and (b) You did not serve a custodial sentence; and (c) the offence was not a specified offence; and (d) you have paid any fine or costs. Note – all convictions in another jurisdiction must be disclosed.	Yes / No (If yes- please give details)
Are there any criminal charges against you that are yet to be heard?	Yes / No (If yes- please give details)
If your application for employment is successful, do you agree to undergo a full criminal check (the details of which are covered later in this form)?	Yes / No

MEDICAL INFORMATION	
Please note that any offer of employment that n employment medical requirements and obtaining	nay be made is subject to you completing the Company's pregary a full medical clearance if requested.
If your application is successful, do you agree to undergo a medical examination, including an alcohol and drug test, if requested? (the test and/or examination would be conducted by a medical practitioner nominated by the Company)	Yes / No
Do you consent to the results of the medical examination and/or drug and alcohol testing being disclosed to the Company?	Yes / No
Do you have or have you had any injury or medical condition caused by gradual process, disease or infection e.g. hearing loss, sensitivity to chemicals, repetitive strain or back injuries that may be aggravated or further contributed to by the tasks of this job?	Yes / No (If yes - please give details)
Do you have or have you suffered from any illness that may affect your performance on the job, either now or in the future?	Yes / No (If yes - please give details)
Do you have any medical condition that might affect your own safety or the safety of others when carrying out your employment?	Yes / No (If yes - please give details)
GENERAL INFORMATION	
Have you worked for E Hayes, Hammer Hardware, Mitre10, TradeZone, Columbus Coffee or any associated Company before?	Yes / No (If yes - please give details)
Do you have a spouse, partner, relative or household member working here or	Yes / No (If yes - please give details)

elsewhere in the industry?

Is there anything which may affect your regular attendance at work e.g. studying, community service, sports, military commitments?	Yes / No (Please give details)	
Do you have a current valid Driver's Licence?	Yes / No	
Licence information:	Class:	
	Number:	
Any special conditions or restrictions?		
Any demerit points?	Yes / No	
	Yes / No	
(Please supply details if job related)		
Other Licences (i.e. forklift etc)		
EDUCATION & QUALIFICATIONS		
School Certificate / NCEA Level 1	Yes / No	
Sixth Form Certificate / NCEA Level 2	Yes / No	
University Bursary / NCEA Level 3	Yes / No	
Name of secondary school(s) attended		
ACADEMIC QUALIFICATIONS	(Please give details)	Year Completed
Name & address of tertiary establishment attended		
Certificate:		
Diploma:		
Degree:		
Post Graduate Diploma:		
Subjects specialised in:		
TRADE QUALIFICATIONS HELD	Yes / No (Please give details)	•
Do you have apprenticeship papers?		
In what trade?		
Name and address of the employer?		
Trade Certificate		
Advanced Trade Certificate		······
Do you authorise the Company to contact any institutions referred to above to verify any qualifications listed?	Yes / No	
LANGUAGES (other than English)		
Are you able to hold an everyday conversation in these language(s)?	Yes / No (Please Specify)	

EMPLOYMENT HISTORY (Please fill in <u>and</u> attach resume)					
	y Act 2020, should we want to make you a formal job offer, do resent or past employers for the purposes of reference				
Yes	s / No				
If your application is successful, when could you commence employment?					
Most recent employer (1)					
Company name					
Address					
Number of hours worked per week					
Position held					
Main duties					
Length of service	From (Month) (Yr) To (Month) (Yr)				
Reason for leaving					
Most recent employer (2)					
Company name					
Address					
Number of hours worked per week					
Position held					
Main duties					
Length of service	From (Month) (Yr) To (Month) (Yr)				
Reason for leaving					
Most recent employer (3)					
Company name					
Address					
Number of hours worked per week					
Position held					

Main duties	
Length of service	From (Month) (Yr) To (Month) (Yr)
Reason for leaving	

Please give details of any other job you believe may be relevant:	
Do you have secondary employment?	Yes / No (Please give details)
Have you ever been disciplined for any matter in your previous employment, including dishonesty?	Yes / No (Please give details)
Have you ever been dismissed from employment or been the subject of an investigation that resulted in your resignation?	Yes / No (Please give details)
Are you subject to any restrictive covenants (such as confidentiality, non-solicitation or a restraint of trade)?	Yes / No (Please give details)

YOUR AVAILABILITY TO WORK

Please tick (✓) where you are available to work, and cross (x) where you are UNAVAILABLE to work. Please WRITE IN hours you are available for selected times within the shift (i.e. from 4pm to 8pm)

Shift	Monday Store open 7.30am – 5.30pm	Tuesday Store open 7.30am – 5.30pm	Wednesday Store open 7.30am – 5.30pm	Thursday Store open 7.30am – 5.30pm	Friday Store open 7.30am – 5.30pm	Saturday Store open 9am – 4pm	Sunday Store open 10am –4pm
Morning 7.30am – 12:00 midday							
Afternoon 12:00 midday – 5.30pm							

Please provide reasons for unavailability (i.e. university lectures):

I understand the above information is a true reflection of the hours that I am available to work, and that my rostered hours will be based on my availability to work indicated above.

OTHER RELEVANT MATTERS	
Are there any other matters relevant to your suitability for the position that we should be aware of?	

REFEREES

It is E Hayes & Sons policy to obtain a minimum of two work related verbal references. These should be either your immediate supervisor or another person with whom you regularly interacted with in carrying out your day-to-day work duties.

Name	Position	Relationship	Company	Contact Number
1.				
2.				
3.				

DECLARATION

(For the purposes of pre-employment checks)

Date of birth:/..../....