

## APPLICATION FOR EMPLOYMENT

### PERSONAL INFORMATION UNDER THE PRIVACY ACT 1993

The information you provide on this form will be used to process your application and assess your suitability for employment with Cancer Society Of NZ Central Districts Division Inc. The information requested is and not required by Law, but if insufficient information is provided your application may not be considered.

People having direct access to this information may include members of the executive committee, interview panel and staff responsible for the position.

You have a right to access personal information about you and seek any correction you think necessary to ensure accuracy. You are however advised that any request for *evaluative/opinion* based material held on you will be declined.

This information will be securely held in the Society's files for a maximum period of six months from the time an appointment is made, after that time it will be destroyed, unless you are the appointee in which case the information will be placed on your personal file.

NOTE: Completion of this form **does not** indicate any commitment to employ you.

**Name of Applicant** \_\_\_\_\_

**Date of Application:** \_\_\_\_\_

**Position Applied for:** **Fundraising and Events Coordinator – Taranaki (Fixed Term Contract)**

**Closing date:** **By 5pm Friday 29<sup>th</sup> October, 2021.**

**Please include:** **Cover Letter**  
**Completed Application for Employment form (including this page)**  
**Curriculum Vitae (CV)**

**Email to:** **Sushmita Chakravarty@cancercd.org.nz**

***This application is to be completed personally by the job applicant.***

| 1. PERSONAL INFORMATION (Please print) |                                             |
|----------------------------------------|---------------------------------------------|
| Title                                  | Mr / Mrs / Miss / Ms / Other (please state) |
| Surname:                               |                                             |
| Given Names (underline name used):     |                                             |
| Are you known by any other name(s)?    |                                             |
| Date of Birth (Optional):              |                                             |

| 2. YOUR CONTACT DETAILS |  |
|-------------------------|--|
| Number & Street:        |  |
| Suburb & Town:          |  |
| Contact Phone Number:   |  |
| Email address:          |  |

| 3. ETHNICITY                                                                                                                                             |                 |
|----------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------|
| <i>This information is collected for:<br/>statistical purposes, to support cultural identity, and to support staff with English as a second language</i> |                 |
| Where were you born?                                                                                                                                     |                 |
| What Ethnicity do you identify with?                                                                                                                     |                 |
| Iwi Affiliation (s)                                                                                                                                      |                 |
| What languages do you speak?                                                                                                                             |                 |
| Are you legally entitled to work in NZ?                                                                                                                  | <b>Yes / No</b> |
| If No please give details of your current Visa status :                                                                                                  |                 |
|                                                                                                                                                          |                 |

#### 4. EDUCATION and QUALIFICATION

Please state any qualifications that you hold that are relevant to the position applied for:

Any other qualifications (secondary or tertiary)

#### 5. EMPLOYMENT HISTORY

**Please give details of your current or most recent Employer**

Company

Position held

Main duties

Hours per week

**Reason For leaving**

**Next most recent Employment**

Company

Position held

Main duties

Hours per week

**Reason For leaving**

| Next most recent Employment                                                                                                |  |
|----------------------------------------------------------------------------------------------------------------------------|--|
| Company                                                                                                                    |  |
| Position held                                                                                                              |  |
| Main duties                                                                                                                |  |
| Hours per week                                                                                                             |  |
| <b>Reason For leaving</b>                                                                                                  |  |
| <b>Other Work Experiences:</b> Please give details of any other <b>relevant work experience</b> or <b>Voluntary work</b> . |  |
|                                                                                                                            |  |

| 6. INTERESTS                                                                    |
|---------------------------------------------------------------------------------|
| What are your Hobbies, Interests, Clubs, Affiliations, or community activities? |
|                                                                                 |

| 7. HEALTH & WELLBEING                                                                                                                                                                                                                                                                                  |                 |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------|
| Have you had or do you have an injury or medical condition caused by gradual process disease or infection, e.g. hearing loss, sensitivity to chemicals, repetitive strain injuries which the tasks of this job may aggravate or contribute to?<br><b>If yes, please give details or attach records</b> | <b>YES / NO</b> |
| Would you require any alterations or additions to your work area in order to perform your duties satisfactorily?<br><b>If yes, please give details</b>                                                                                                                                                 | <b>YES / NO</b> |
| The Cancer Society is totally <b>smoke free</b> at all times. <b>Can you uphold this policy?</b>                                                                                                                                                                                                       | <b>YES / NO</b> |

| 8. GENERAL INFORMATION                                                                                                                                                                                                                                                                                                                                                 |          |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------|
| If offered this position do you intend to engage in any other paid or Voluntary work?<br><b>If YES , please give details</b>                                                                                                                                                                                                                                           | YES / NO |
| Are you a member of any territorial force unit? (military, rural fire etc)<br><b>If YES please give details</b>                                                                                                                                                                                                                                                        | YES / NO |
| Are you prepared to work out of normal work hours, if required?                                                                                                                                                                                                                                                                                                        | YES / NO |
| Do you have any existing personal, religious, or family, or other commitments, or conflicts of interest that could make it difficult for you to fulfil the role (whether continually or from time to time)?<br><b>If YES please give details</b>                                                                                                                       | YES / NO |
| Do you have a current and <u>full</u> New Zealand Drivers License?                                                                                                                                                                                                                                                                                                     | YES / NO |
| Driver's Licence Restrictions:                                                                                                                                                                                                                                                                                                                                         |          |
| Driver's License Number:                                                                                                                                                                                                                                                                                                                                               |          |
| Do you have a well maintained vehicle that you could access for work purposes?                                                                                                                                                                                                                                                                                         | YES / NO |
| Have you, at any time taken, action against a current or former employer in order to resolve an employment dispute including personal grievance action or other employment relationship problem?                                                                                                                                                                       | YES / NO |
| Have you ever been convicted of a criminal offence?                                                                                                                                                                                                                                                                                                                    | YES / NO |
| Are you awaiting the hearing of charges in a civil or criminal court of law , or have Bankruptcy or Competency rulings pending or in place?                                                                                                                                                                                                                            | YES / NO |
| If offered this position, do you agree to authorise the Cancer Society to obtain a copy of personal information held on you by the Department of Courts / NZ Police ?                                                                                                                                                                                                  | YES / NO |
| How would you rate your overall computer skills?<br>1 = beginner, 2= intermediate, 3= advanced                                                                                                                                                                                                                                                                         | 1 2 3    |
| If you are offered this position, when could you start employment?                                                                                                                                                                                                                                                                                                     |          |
| What would your Salary expectation for this position be                                                                                                                                                                                                                                                                                                                | \$       |
| As part of our commitment to the Tiriti o Waitangi (Treaty of Waitangi) we invite applicants who are short listed for interview to bring whānau or support people to the interview. If you are selected for an interview do you wish to bring whānau /support people with you?<br><br>If YES, approximately how many (so we ensure that sufficient space is available) | YES / NO |

## 9. REFEREES

Please supply the names, relationships, and contact details of at least three (3) people who we can contact. At least 2 of these should be people you have **reported directly** to eg. Manager or supervisors.

1)

2)

3)

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

*(We will only contact referees if you are short listed for the position).*

YES / NO

Is there anything else that you wish to add to this application?

YES / NO

Is there anything that you would discuss or disclose at interview that you do not wish to document here?

YES / NO

## 10. DECLARATION

I, \_\_\_\_\_ (full name)

Declare that to the best of my knowledge, the answers to the questions in this application are correct and were completed by me.

I understand that if any false or misleading information is given, or any material fact withheld, I may not be accepted or considered for the position.

AND if I am employed, and any aspect of this application is found to be false or misleading there may be disciplinary action up to and including immediate dismissal.

Signature

Date