**A close up of a sign

Description automatically generatedDiocese of Palmerston North**

**Employment Form**

*The information that you provide on this form and information obtained from referees will only be used for   
recruitment and selection purposes. All information provided will be kept secure.*

**Please complete this form and return it with your application letter and C.V***.*

**1. Position applied for**

**2. Mr Ms Mrs Miss** *(Circle)* **Other …………….**

**Surname or family name**

**First names**

**Address**

**Email**

**Telephone/Mobile**

**3. Are you legally entitled to work in New Zealand?** YES / NO

*You qualify if you are a New Zealand citizen, have permanent residence status, or appropriate work permit. Documentary proof may be required.*

**4. Do you hold a full New Zealand Drivers Licence?** YES / NO **Number:**

**5. Please disclose all criminal convictions, unless covered by the Clean Slate Act 2004.***View the Ministry of Justice website for further information on what you are required to declare:* [*https://www.justice.govt.nz/criminal-records/clean-slate/*](https://www.justice.govt.nz/criminal-records/clean-slate/)

**6. Please provide a list of recent employment history -** commencing with current position you hold

|  |  |  |  |
| --- | --- | --- | --- |
| **Employer** | **Position held** | **Period**  **employed** | **Reason for**  **leaving** |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

**7. Please provide a list of qualifications** - relevant degrees, diplomas or other qualifications.

|  |  |
| --- | --- |
| **Education Qualifications & Awarding Institution** | **Date Awarded** |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |

*Originals or certified copies may need to be provided for verification if you are appointed.*

**8. Please provide a list of certifications or registrations** – e.g. Teachers registration, First Aid certification

|  |  |
| --- | --- |
| **Registration, certification Name** | **Date of Expiry** |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |

**9. Please give the names and contact details of 2 referees.***It is preferable that one is your most recent employer.*

|  |  |  |
| --- | --- | --- |
| **Name & Relationship** | Email | **Telephone: Work**  **Home/Mobile** |
|  |  |  |
|  |  |  |

**10. DECLARATION / AUTHORISATION**

I consent to referees named on this form and/or on my C.V. being consulted about this application.

I also give permission to the Roman Catholic Bishop of the Diocese of Palmerston North and his delegates/agents to make other enquiries as they see fit in relation to my application and consent to the disclosure of information to them by such persons of whom enquiry is made on matters relevant to my suitability for the role applied for.

I certify that the information I have provided in this form and information in my C.V. are true and correct. I understand that if I have given incorrect, incomplete, or misleading information I may be disqualified from appointment, or if appointed, my employment may be terminated.

Signature Date

Address your completed application to:

**[Name]**

**[Role]**

**Diocese of Palmerston north**

**Private Bag 11012**

**Palmerston North**

**For Office Use only**

*Date Application Received: ………………………………..*

*Acknowledgement of receipt of Application sent: .……………………………….*