

# Aroma Aquaculture Marine Farming - Havelock Application for Employment

**Confidential**

**To be completed personally by applicant**

**Date of Application:**.....

**NB: The completion of this form does not indicate that there is any obligation on Aroma Aquaculture Marine Farming – Havelock to engage the applicant**

## **Purpose**

This information is collected for the purpose of assessing your suitability for employment at Aroma Aquaculture Marine Farming – Havelock which may include subsequent changes in employment with the firm.

We may wish to retain the information on file.

Permission:            granted/not granted (strike one)

Position Applied for: .....

Your Name:            Mr/Mrs/Miss  
**(In block letters)**

Surname: .....

**Given Names:** .....

Other names used: .....

Your Home            Number and Street: .....

Address &            Suburb & Town : .....

Contact                Home Phone No: .....

Details                 Mobile No: .....

Work Ph: .....

Email: .....

Details                 Date of Birth: .....

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## Employment History

Present or most recent employer: From..... to .....

Company: .....

Address: .....

Phone No: .....

Position Held: .....

Main duties: .....

No. of hours worked per week: .....

Reason for leaving: .....

Do you give consent to Aroma Aquaculture Marine Farming – Havelock contacting your present employer for the purpose of reference checking:

Yes/No

Next most recent employer: From..... to .....

Company: .....

Address: .....

Phone No: .....

Position Held: .....

Main duties: .....

No. of hours worked per week: .....

Reason for leaving: .....

Do you give consent to Aroma Aquaculture Marine Farming - Havelock contacting your present employer for the purpose of reference checking:

Yes/No

Give details of any other experience which may be relevant to the position applied for:

.....  
.....  
.....

Do you have secondary employment : If yes please provide details: .....

.....  
.....  
.....

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Referees:

Provide name, addresses and telephone details of at least two referees (preferably from where you have worked)

Name: .....

Position: .....

Address: .....

Phone No: .....

Name: .....

Position: .....

Address: .....

Phone No: .....

If your application is accepted what date could you commence work?

Date: .....

I consent to Aroma Aquaculture Marine Farming - Havelock seeking verbal or written information about me from representatives of my previous employers and/or referees and authorise the information sought, to be released.

Yes/No

Have you been convicted of a criminal offence: Yes/No

If so please give details:

.....  
.....  
.....

Are you awaiting the hearing of charges in a civil or criminal court of law: Yes/No

If so please give details: .....

.....  
.....

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I consent to Aroma Aquaculture Marine Farming - Havelock conducting a Police check and obtaining a list of any previous convictions I may have incurred:

Yes/No

If yes: Signature..... Date: .....

Have you been convicted of any driving offence: Yes/No

If so please give details:

.....  
.....  
.....

Drivers License No: .....

What are your current driver's licence classes held: .....

What endorsements do you have on your license: .....

## Medical

Do you have a hearing problem Yes/No

Have you ever suffered from any RSI related syndromes Yes/No

If yes, please provide details: .....

.....  
.....

Do you require corrective lenses Yes/No

Have you exceeded 10 days sick leave in the past 2 years Yes/No

If yes, please explain why and how much leave you took: .....

.....  
.....

State any injury or illness you have suffered that may affect your ability to effectively carry out the functions and responsibilities of the position applied for: .....

.....  
.....

Do you take prescription medicine Yes/No

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If Yes, please provide details with dosage:

.....  
.....

## General

Are you a smoker Yes/No

Are you prepared to work overtime when required Yes/No

What transport arrangements do you have to attend your place of work: .....

What are your interests/hobbies/sports/clubs/ or community activities:

.....  
.....  
.....  
.....

I consent to Aroma NZ seeking verbal or written information from ACC on any of my past records and authorise the information sought, to be released.

If yes: Signature: ..... Date: .....

**Aroma Aquaculture Marine Farming – Havelock is committed to a drug and alcohol free workplace. The successful applicant may be required to undergo a pre-employment drug test.**

## DECLARATION:

I (FULL NAME) : .....

Declare that to the best of my knowledge the answers in this application are correct and I understand that if any false or deliberately misleading information is given, or any material fact suppressed, I will not be accepted, or if I am employed, my employment will be terminated. I also understand that any false information given in relation to any medical history may result in my loss of entitlement for any compensation from ACC.

.....

Signature

.....

Date