



# Crown Job Application Form - HR07.2

Applicants Name: \_\_\_\_\_ Date: \_\_\_\_\_

Position Applied for: \_\_\_\_\_ As advertised? \_\_\_\_\_

Which best describes your work status in New Zealand? Citizenship  Resident Visa  Working Holiday Visa  Work Visa   
Student Visa  Visitor Visa  Comments: \_\_\_\_\_

Home Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Home Telephone: \_\_\_\_\_ Mobile: \_\_\_\_\_  
\_\_\_\_\_ E-Mail: \_\_\_\_\_

Next of Kin details: Name: \_\_\_\_\_ Relationship: \_\_\_\_\_  
\_\_\_\_\_  
Phone number: \_\_\_\_\_

Have you worked for Crown Worldwide Group before? Yes  No   
If Yes Branch \_\_\_\_\_ Country \_\_\_\_\_

I, \_\_\_\_\_ consent to Crown Worldwide (NZ) Ltd obtaining information relating to my driver licence from Land Transport NZ. I understand that Crown Worldwide (NZ) Ltd may perform a one-off query on my driver licence, and also register my details with Driver Check so that Crown Worldwide (NZ) Ltd is notified of any changes to my licence.

Driver Licence No. (5a) \_\_\_\_\_ Version No. (5b) \_\_\_\_\_  
Classes held \_\_\_\_\_ Endorsements held \_\_\_\_\_  
Licence expiry date \_\_\_\_\_

**EDUCATION: (Can refer to C.V. if provided with application)**

College/University	From/To	Subject	Qualification

**Other Qualifications:**

**EMPLOYMENT HISTORY: (Can refer to C.V. if provided with application)**

Company	From/To	Position Held	Reason Left
<b>Notes:</b>			

**HEALTH STATEMENT / ACC STATEMENTS:**

Do you currently have, or, have you previously had any symptoms of; back, neck leg or arm injury, occupational overuse syndrome such as aches, pains, numbness or burning sensations while performing any activities, heart problems or stress related injuries, or, any other injury or illness which may impact on your ability to perform the position you have applied for?

YES

NO

If Yes, please provide detail:

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Do you currently have any outstanding claims for any work related injuries with ACC?

YES

NO

If Yes, please provide detail:

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Should it be discovered that this information regarding pre-existing back injuries or any other information above, is false, then this could prove to be grounds for immediate termination of your employment.

I verify the information provided above is a true and accurate depiction of my current health status:

Signature: \_\_\_\_\_ (Applicant)                      Date \_\_\_\_\_

As part of the Crown Health and Safety programme, to ensure safe workplace practices we may conduct "Pre - Contract" and "Random" drug and alcohol tests in applicable areas of employment, this is a requirement of our Health and Safety policy.

Do you consent to a preliminary drug and alcohol test being conducted within your trial period and further random tests as required?

YES

NO

**SECURITY**

Are you currently involved with any criminal cases being brought against you, or, do you have a previous police record for any criminal or driving offences?

YES

NO

**If Yes, please provide detail:**

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Crown Relocations conduct thorough driver, credit, criminal and background checks. Do you give permission for us to contact Ministry of Justice, and NZTA to conduct these checks? Any offer of employment is subject to satisfactory completion/result of the pre-employment and preliminary checks. Applicable forms will be forwarded to you for completion on line or manually and any offer of employment is subject to these security checks.

YES

NO

I declare that I have completed this application to the best of my knowledge and have read and understood all questions. I agree to any security and health and safety check/test as per the above being conducted. I acknowledge that I have provided all information relevant to my application and if I have withheld or supplied misleading information then I may not be considered for employment or if employed I may be subject to dismissal.

Signature: \_\_\_\_\_ (Applicant)

Date \_\_\_\_\_