

EMPLOYEE CANDIDATE SCREENING

Office use only:									
CV	Visa/PP	Ref	RDB	Scan	IMS	Photo	COVID Card		
Attributes:									
Interviewed by:		Date:		Notes:					
Given Names:			Surname /	Last Nam	e:				
Date Birth:			Gender:						
Street Address:									
City:			Region:				Postcode:		
Cell Phone:			Email:						
Emergency Contact:			Phone:				Relationship:		
Are you a citizen of NZ?		If NI =	ط ۱۰۵۰۰ ما	اماد میدادها د	د ماد دامد ۲	Vice	Eva Data:		
Yes No		Yes	do you hav	re a valid v (COPY REC			Exp Date: onality:		
103 110			•	•	,		·		
	Additional Do		1		/ Alcohol				
Do you have a current NZ	Drivers Licen	ce?	Licence	#:		Le	arners / Restricted / Full Licence		
Circle: Yes No (COPY REQUIRED)									
Licence Type (Circle Relev	/ant):	1 2	3 4	5 6 W	/ T R	F P	A G		
Do you have your own		Do yo	u have exp	erience w	rith:				
transport? Yes No E		Basic	Basic Hand Tools / Power Tools / Other Trade Tools						
Would you work shifts?	Yes No								
Please list any PPE gear y	ou have, i.e. S	afety bo	oots, Hard I	Hat, Hi Viz	:				
		-	_		_	-	or to commencing a placement. Some of		
Drug & Alcohol Testing	our clients also require or carry out "post incident/injury", "just cause", and "random testing". If you take a drug or alcohol test with either Naki Labour Hire or another external accredited provider, and provide a								
35 67 501101 1 5061115		est result, you will be liable for the FULL cost of the test and by signing this document you							
	agree to the ab	ove circu	ımstances.						
Do you agree to take a drug test:			Do you also agree drug test results can be provided to client:						
Yes No			Yes No Do you agree to a Covid Test at a Clients request: Yes No						
Have you had Covid Vacc Vaccine Completed: On		No	-	agree to a Vaccine R			ents request: Yes No No		





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Have you had any criminal convictions, or are you currently facing charges that may result in one?								
				Yes	No			
If yes to convictions, please provide details, i	ncluding date a	and penalties:						
Have you had any previous ACC claims? Circ	le Yes No	Incident deta	ils:					
Are you currently taking any medication? If y	es please list:	1						
When are you available to start work?								
Employment history and work experience p	lease circle rele	evant:						
Administration	Construc		Driving/Warehouse	e logistic	cs			
Electrical/ Air Con	Engineer	ring	Gas/Oil					
General Labouring	Joinery F	urniture	Landscape / Concre	Landscape / Concrete				
Manufacture/ process	Mechani	cal	Painting/ Decorating	Painting/ Decorating/ Plasteri				
Plumbing/ Gas Fitting	Roading/	Traffic	Other:					
Please provide two previous employers deta	ails that you w	ould be happy t	for us to contact for a refe	rence ch	eck?			
1. Name	Number							
2. Name	Number							
How did you hear about us? Trademe / MS	SD / Website / I	Facebook or Re	ferred by another employe	e (name	e)			
Have you registered with any other employm	nent agency?							
Disclaimer: I certify that my answers are true and completed this application remains the property of Naki Labour Conviction Check, to do a Driver's License Check, Check Questionnaires may be disclosed to a client whom I am w injury drug / alcohol testing if required and I understar cost of the test. If this application leads to employment, n my release.	Hire. I hereby prov Visa/Passport deta vorking for or abound that if I take a t I understand that	vide permission for ails and to contact at to be working for est and provide a N false or misleadin	Naki Labour Hire to obtain a Min the given references. These (har . I hereby agree to random, just o NON-NEGATIVE test result, I am t	istry of Ju dcopies) a cause or p then liable	stice Crimina and/or Healt post incident e for the FUL			
Candidate Signature:		Date:						

