

GRAIN & FOOD LTD

AGRICULTURAL CONTRACTORS



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Application for employment *(please complete in block capitals)*

This application for employment with the company forms part of the terms and conditions of employment. It is therefore to be personally completed and signed by the applicant.

Strictly Confidential

There is a general obligation on all employees not to divulge confidential organisational business to person not entitled to know. Any breach of this obligation will result in disciplinary action being taken. Please note that these obligations apply to this application.

General Information	
Position applied for	
Date of application	
How did you hear of the vacancy:	
If your application is successful when can you start:	
If your application is successful when would you have to return/end your employment	

Personal Information	
Surname	
Given Names	
Other name by which you are know by	
Date of Birth	
Place of birth	
Marital Status	
Permanent Address	Street: Suburb: Town/City: County:

	Post Code:
Email	
Home Phone	
Mobile	
IRD Number	

<i>In Case of Emergency</i>	
Contact Name	
Contact Phone Number	
Relationship to you	
Doctor Name	
Doctor Telephone	

<i>Licence Details</i>	
Do you hold a current drivers licence?	
If Yes what type (Learners, restricted, full)	
Issue Date	
Expiry Date	
Classes	
Endorsements	

<i>Education & professional qualifications</i>	
Do you have any qualifications/certificates/licences or have you attend any courses which you see as relevant to the position you are applying for please give details	
Name of course completed	Type of qualification received and date received

<i>Employment History</i>	
1. Current/Past Employer	
Contact Name	
Address	
Position held	
Main Duties	
Length of employment	
Reason for leaving	
For the purposes of the privacy act 1993 do you consent to the company contacting your present employer for the purposes of reference checking?	YES / NO Signed:
2. Current/Past Employer	
Contact Name	
Address	
Position held	
Main Duties	
Length of employment	
Reason for leaving	
3. Current/Past Employer	
Contact Name	
Address	
Position held	
Main Duties	
Length of employment	
Reason for leaving	
Please give details of any other employment which may be relevant (employer, position, dates etc)	

Answer continued from previous page..

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Skills Assessment

Please circle the skill level you consider to be most correct, the levels are explained at the bottom of page.

Zero - never operated machine before.

One – Limited experience with this machine may have operated once or twice.

Two – basic experience could perform basic task with machine.

Three – Moderate experience comfortable using this machine.

Four – confident setting up and operating this machine in a variety of conditions.

Five - highest skill level of operation, can confidently set up, operate and service machine in order to operate it its highest performance and all conditions.

<i>Machine operation</i>	<i>Skill Level</i>					
2 Rotary Rake	0	1	2	3	4	5
4 Rotary Rake	0	1	2	3	4	5
Chip Hoe	0	1	2	3	4	5
Digger – Drain Work	0	1	2	3	4	5
Digger – Site Work	0	1	2	3	4	5
Direct Drilling	0	1	2	3	4	5
Discing	0	1	2	3	4	5
Fertiliser Spreading	0	1	2	3	4	5
Grader – Race Construction	0	1	2	3	4	5
Loader Wagon	0	1	2	3	4	5
Machinery Maintenance	0	1	2	3	4	5
Maize Planting	0	1	2	3	4	5
Mowing	0	1	2	3	4	5
Muck Spreader	0	1	2	3	4	5
Ploughing	0	1	2	3	4	5
Power Harrow	0	1	2	3	4	5
Record Keeping – ability to complete paper work	0	1	2	3	4	5
Ripping	0	1	2	3	4	5
Roller – Race & Site Work	0	1	2	3	4	5
Roller Drill	0	1	2	3	4	5
Rotary Hoe	0	1	2	3	4	5
Round Bale & Wrap Combo	0	1	2	3	4	5
Round Baler	0	1	2	3	4	5
Spraying	0	1	2	3	4	5
Square Baler	0	1	2	3	4	5
Tractor & Trailer	0	1	2	3	4	5
Truck & Trailer	0	1	2	3	4	5
Truck Only	0	1	2	3	4	5
Use of GPS Systems	0	1	2	3	4	5
Wrapping	0	1	2	3	4	5

Experience gained

If you have rated 4 or 5 for any of the above please give details of the machine you have driven,

numbers of hours/years of experience, bale numbers etc

References

Please supply name, address and telephone number of at least two references (preferably from where you have worked)

1. Name of contact	
Relationship	
Period Known	
Contact phone	
Contact Address	
2. Name of contact	
Relationship	
Period Known	
Contact phone	
Contact Address	
I consent to the company seeking verbal or written information about me from representatives of my previous employers and/or referees and authorise the information to be released by them. I understand that the information received by the company is supplied in confidence as evaluative material and will not be disclosed to me.	
Signed & Dated	

Nationality and Right to Work Details

If you were not born in New Zealand do you hold New Zealand citizenship or a valid work permit	Yes / No
If yes please specify what type of visa you hold	
If you were not born in NZ what date did you gain your citizenship/work permit/visa	
Are you legally entitled to work in NZ	

All applicants are required to attached documentation showing satisfactory proof of identity and NZ citizenship or legal entitlement to work in NZ ie passport showing visa, birth certificate, work permit	
Documents Attached	
I understand that this application for employment will be rendered invalid if i fail to attached above stated proof, and that if employed if i provide any false or misleading information my employment will eb terminated	
Signed & Dated	

Living Away from Home (Overseas applicants only)

Grain & Food Ltd provide accommodation for our overseas staff; along with groceries for breakfast and lunch we also provide a hot evening meal during peak season.

Will you have approximately \$2,500 NZD to cover your set up costs? (includes a car purchase)

Have you done much travelling before?

Have you lived away from home before?

Have you lived in a flatting situation with a group of people before?

You will be responsible to look after yourself (breakfast and lunch prep, cleaning washing etc) describe how you think you would be able to manage these things

It will be a shared responsibility to run the house you will be living in. Describe how you think you will cope with living and working with the same people on a daily basis?

General Information -

Have you been convicted of an offence in the last 7 years

If you have been convicted of any criminal offence (not including any concealed under the criminal records clean slate act) which may be relevant to the job or your availability to do the job? If yes please give details

Are you awaiting the hearing of charges in a civil or criminal court of law?

Do you have any outstanding Court fines (NZ Applicants only)

Are you willing and able to work extended hours of required to do so?

Are you prepared to handle all products, materials or equipment used in the industry?

Are there any reasons why you would be unable to attend your place of employment on time?	
Do you have secondary employment?	
What is your main reason for why you want to work with us?	
What would you consider your main strengths, weaknesses and attributes?	
Health Background	
Are you a smoker	
Do you have an injury or illness that has lead to time off work in the past and that may affect your ability to undertake duties associated with the position you have applied for?	
Do you have or have you had in the past, a gradual process disease (ie occupation overuse syndrome, repetitive strain injury, carpal tunnel syndrome) that may affect your ability to undertake duties associated with the position you have applied for?	
Eyesight – please give details Do you have to wear prescription lenses or contact lenses for reading, driving or other activities?	YES / NO
Do you suffer from any other problem with your eyes which may affect your ability to undertake the duties associated with the position you have applied for?	YES / NO
Hearing – please give details Do you have any problem with your hearing?	YES / NO
Have you ever worked in a place that was so noisy you had to shout to be heard?	YES / NO
Arm & Shoulders Do you suffer, or have you ever suffered from aching or painful shoulders, arms or wrists while you are working or when you have finished work?	YES / NO
Back Do you suffer, or have you ever suffered from an aching or painful shoulders, arms or wrists while you are working or when you have finished work?	YES / NO
General Do you suffer from any other condition, mental or physical, which may affect your ability to undertake the duties associated with the position you have applied for?	YES / NO
Do you have a physical disability requiring special aids or requirements for access to premises?	YES / NO
If you are offered employment, that offer may be	YES / NO

subject to satisfactory medical examination and the company receiving a full medical clearance as part of the pre-employment checks. If required, such a medical examination would be at your expense. Do you agree to undergo a medical examination of requested?	
<i>Declaration – voluntary response</i>	
Are you in a relationship with an employee of another competitive company where there may be a real risk of collusion, which could be determined to this organisation?	YES / NO
Do you consent to the company retaining the information contained in this application form for the purposes of consideration your suitability for any other position, which may arise with this organisation in the future?	YES / NO
Is there anything else you wish to tell us ie your hobbies, interested, goals for the future?	
<i>Declaration – compulsory response</i>	
I _____ (full name) declare that to the best of my knowledge the answers in the application are correct and I understand that if any false or deliberately misleading information is given, or any material fact suppressed, it will not be accepted, or if I am employed, my employment will be terminated.	
I further understand that any offer of employment is conditioned upon satisfactory proof of identification and legal entitlement to work in New Zealand and that the company is legally required by the New Zealand Government to hire only NZ citizens and /or non-citizens who are legally authorised to work in New Zealand.	
Signed & Date	

This application form will be a source of information that will be used by the company to assist it in considering your suitability to the position for which you are applying, and/or may be included for consideration of employment during subsequent changes in the company. The completion of this form does not indicate that there is any obligation on the company to employ the applicant.

If successful, this information shall form part of the company's personnel records, and may also be used for the purpose of assessing your suitability for subsequent changes in employment within the organisation.

You are entitled to access this information upon request to the manager.

Information relating to unsuccessful applicants shall be retained by the company for a period of approximately 12 months and then destroyed, unless the applicant specifies otherwise.

The above information provided in accordance with the privacy act 1993.