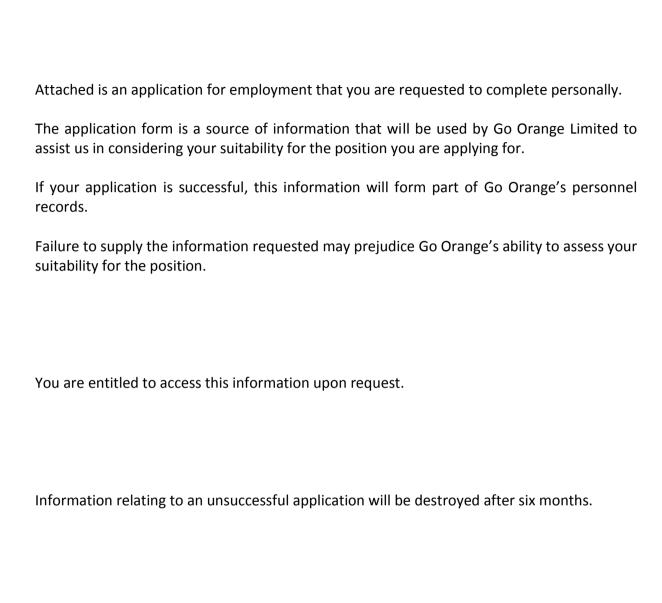


# APPLICATION FOR EMPLOYMENT

## **CONFIDENTIAL**

## **APPLICATION FORM**



# Go Orange!

### APPLICATION FOR EMPLOYMENT

[Please include a covering letter with this application form setting out the reasons why you would be a suitable candidate for the position(s) you have applied for]

| Position/s a  | pplied for in order of prefe                       | erence: |                                   |           |                                         |
|---------------|----------------------------------------------------|---------|-----------------------------------|-----------|-----------------------------------------|
| Position 1:   |                                                    |         | Location:                         | Location: |                                         |
| Position 2:   |                                                    |         | Location:                         | Location: |                                         |
| Position 3:   |                                                    |         | Location:                         | Location: |                                         |
| How did you   | u find out about this vacan                        | icy?    |                                   |           |                                         |
| SEE           | ΕK                                                 |         | TRADEME                           |           |                                         |
| Cor           | mpany Website                                      |         | Other website                     |           | ease state                              |
| Frie          | end/Family member                                  |         | Go Orange staff member            |           |                                         |
| Tra           | nining Provider                                    |         |                                   |           |                                         |
|               |                                                    |         |                                   |           |                                         |
| Section 1     | PERSONAL DETAIL                                    | S       |                                   |           |                                         |
| Title: Mr / N | /ls /Mrs / Miss                                    |         | Surname:                          |           |                                         |
| First Name:   | Name: Preferred Name:                              |         |                                   |           |                                         |
| Address:      |                                                    |         |                                   |           |                                         |
|               |                                                    |         |                                   |           |                                         |
|               |                                                    |         |                                   |           |                                         |
| Phone:        |                                                    |         | Mobile:                           |           |                                         |
| E-mail:       | nail:                                              |         |                                   |           |                                         |
|               |                                                    |         |                                   |           |                                         |
| Section 2     | LEGAL WORK STAT                                    | TUS     |                                   |           |                                         |
| Are you lega  | ally entitled to work in Nev                       |         | Yes / No                          |           |                                         |
| If yes, unde  | r what circumstances;                              |         |                                   | tick ( V, | ý                                       |
| a)            | Are you a New Zealand/                             |         | zen?                              |           |                                         |
| b)            | Do you have the right of                           |         | esidency?                         |           | - , , , , , , , , , , , , , , , , , , , |
| c)<br>d)      | Do you have a current W<br>Do you have a current W |         | y Visa?                           |           |                                         |
| •             |                                                    |         | ,<br>please provide the country o |           |                                         |
|               |                                                    |         |                                   |           |                                         |
| Expiry date   | of Visa:                                           |         |                                   |           |                                         |

#### Section 3 QUALIFICATIONS AND SKILLS

| Do you hold a current driver        | 's licence? [please provide a copy] |                              |                            |
|-------------------------------------|-------------------------------------|------------------------------|----------------------------|
| □ Yes, New Zealand Driver'          | s License                           |                              |                            |
| □ Yes, International Driver'        | s License                           |                              |                            |
| □ No                                |                                     |                              |                            |
| Licence number:                     |                                     | Expiry Date (if any):        | / /                        |
| If so, what classes?                | 1, 2, 3, 4, 5, 6                    |                              |                            |
| What endorsements?                  | P, V, D, I, O, F, R, T, W           |                              |                            |
| Please describe any driving o       | convictions or demerit points and   | date of such:                |                            |
|                                     |                                     |                              |                            |
|                                     |                                     |                              |                            |
|                                     |                                     |                              |                            |
| List the skills and experience      | you consider are relevant to you    | r application:               |                            |
|                                     |                                     |                              |                            |
|                                     |                                     |                              | <del></del>                |
|                                     |                                     |                              | <del></del>                |
|                                     |                                     |                              |                            |
|                                     |                                     |                              |                            |
| Section 4 REFERE                    | ES                                  |                              |                            |
| Please list referees that Go (role: | Orange can contact to discuss you   | your previous experience and | your ability to perform th |
| Name:                               |                                     | Position:                    |                            |
| Organisation:                       |                                     | Telephone:                   |                            |
| Name:                               |                                     | Position:                    |                            |
| Organisation:                       |                                     | Telephone:                   |                            |
| Name:                               |                                     | Position:                    |                            |
| Organisation:                       |                                     | Telephone:                   |                            |
|                                     | ntact the referees I have named ir  |                              | es about me.               |
| Full Name: (ple                     | ease print)                         | Signature                    |                            |

| •      | Do you have any physical impairments or any condition that may affect how you perform the role?                                                                                                                 | Yes / No         |
|--------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------|
| •      | Do you have any injury or medical condition caused by gradual process, disease or infection that the role may aggravate?                                                                                        | Yes / No         |
| •      | A number of our positions require some lifting – have you ever had or do you suffer from a back injury?                                                                                                         | Yes / No         |
|        | Have you ever lodged an injury claim with ACC or any other injury insurer?                                                                                                                                      | Yes / No         |
| If you | answered yes to any of the above questions, please provide details:                                                                                                                                             |                  |
|        |                                                                                                                                                                                                                 |                  |
|        |                                                                                                                                                                                                                 |                  |
| •      | If you are short-listed for the position, do you agree to undergo a medical examination should Go Orange consider such examination to be relevant to the position? The                                          |                  |
|        | examination may be conducted by a medical practitioner nominated by Go Orange.                                                                                                                                  | Yes / No         |
| Sect   | ion 6 DRUG AND ALCOHOL TESTING                                                                                                                                                                                  |                  |
|        | range has an employment drug and alcohol testing programme. This programme is in place to rety and safety.                                                                                                      | educe risk to    |
| An uı  | nauthorised drug is a drug that has not been prescribed by a fully qualified medical practitioner.                                                                                                              |                  |
|        | sent to provide a urine or blood sample at any time, which may be on a random basis, for the punauthorised drugs or alcohol.                                                                                    | rpose of testing |
| suita  | her consent to the release to Go Orange of the results of any such tests for the purpose of deter bility for employment, and if employed, my continued employment (the results of all tests will be applicant). |                  |
|        | nowledge that if I am employed I will be subject to summary dismissal if I am found to be using, in under the influence of, unauthorised drugs or alcohol.                                                      | n the possession |
| I also | agree to be subject to the conditions of any future company drug and alcohol programme.                                                                                                                         |                  |
| Full N | Name:Signature:                                                                                                                                                                                                 |                  |

(please print)

Section 5 HEALTH

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | eve you ever been convicted of a crime in New Zealand or any other country?                                                                                                                                                                                                                                                                                                                                                                                                            | Yes / No                |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------|
| ■ Ar                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | e there any charges against you yet to be heard?                                                                                                                                                                                                                                                                                                                                                                                                                                       | Yes / No                |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | nswered yes to either of the above questions, please provide details of all convictions:                                                                                                                                                                                                                                                                                                                                                                                               |                         |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                         |
| If you ar                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | e short-listed for a position Go Orange may decide to check your criminal record.                                                                                                                                                                                                                                                                                                                                                                                                      |                         |
| and/or l                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | ise Go Orange (or it's agent) to request and obtain all information about me held on the "neld by the Department for Courts and I authorise the Privacy Officer of the Department ormation.                                                                                                                                                                                                                                                                                            |                         |
| Full Nan                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | ne: Signature: (please print)                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                         |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | (please print)                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                         |
| Section                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | n 8 GENERAL                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                         |
| • Ha                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | ive you ever worked for Go Orange (Sea Kayak Fiordland/Fiordland Wilderness or Real Jo                                                                                                                                                                                                                                                                                                                                                                                                 | urnevs) <b>Yes / No</b> |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | The your even worked for Go Grange (occurring the real state)                                                                                                                                                                                                                                                                                                                                                                                                                          | ae,s, 1 <b>es,</b> 11e  |
| lf v                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | ves, please advise position, location and year:                                                                                                                                                                                                                                                                                                                                                                                                                                        |                         |
| If                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | yes, please advise position, location and year:                                                                                                                                                                                                                                                                                                                                                                                                                                        |                         |
| ■ Do                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | yes, please advise position, location and year:  you have a spouse, partner, relative or household member currently employed by Gorange?                                                                                                                                                                                                                                                                                                                                               | Yes / No                |
| ■ Do                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | you have a spouse, partner, relative or household member currently employed by Go                                                                                                                                                                                                                                                                                                                                                                                                      | ·                       |
| <ul><li>Do Or</li><li>If '</li><li>Ar ro</li></ul>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | you have a spouse, partner, relative or household member currently employed by Go<br>range?                                                                                                                                                                                                                                                                                                                                                                                            | ·                       |
| <ul> <li>Do</li> <li>Or</li> <li>If '</li> <li>Ar</li> <li>ro</li> <li>ho</li> </ul>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | e there any reasons, including outside interests, that might preclude you from working stered shifts over any seven days of a given week (including weekends and public                                                                                                                                                                                                                                                                                                                |                         |
| <ul> <li>Do Or</li> <li>If and the original origi</li></ul> | e there any reasons, including outside interests, that might preclude you from working stered shifts over any seven days of a given week (including weekends and public blidays)?                                                                                                                                                                                                                                                                                                      |                         |
| <ul> <li>Do</li> <li>Or</li> <li>If '</li> <li>Ar</li> <li>ro</li> <li>hc</li> </ul>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | you have a spouse, partner, relative or household member currently employed by Go range?  yes, who?  Location:  e there any reasons, including outside interests, that might preclude you from working stered shifts over any seven days of a given week (including weekends and public blidays)?  yes, please provide details:  e there are reasons that would prevent you from working reasonable extra hours as                                                                     | Yes / No                |
| <ul> <li>Do</li> <li>Or</li> <li>If</li> <li>Ar</li> <li>ro</li> <li>ho</li> </ul>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | you have a spouse, partner, relative or household member currently employed by Go range?  yes, who?  Location:  e there any reasons, including outside interests, that might preclude you from working stered shifts over any seven days of a given week (including weekends and public blidays)?  yes, please provide details:  e there are reasons that would prevent you from working reasonable extra hours as quired?                                                             | Yes / No                |
| <ul> <li>Do</li> <li>Or</li> <li>If</li> <li>Ar</li> <li>ro</li> <li>ho</li> <li>If</li> <li>Ha</li> </ul>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | you have a spouse, partner, relative or household member currently employed by Go range?  yes, who?  Location:  e there any reasons, including outside interests, that might preclude you from working stered shifts over any seven days of a given week (including weekends and public blidays)?  yes, please provide details:  e there are reasons that would prevent you from working reasonable extra hours as quired?  yes, please provide details:                               | Yes / No Yes / No       |
| <ul> <li>Do</li> <li>Or</li> <li>If '</li> <li>Ar ro</li> <li>ho</li> <li>If '</li> <li>Ha</li> <li>If '</li> <li>Ha</li> <li>Ha</li> </ul>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | you have a spouse, partner, relative or household member currently employed by Go range?  yes, who?  Location:  e there any reasons, including outside interests, that might preclude you from working stered shifts over any seven days of a given week (including weekends and public blidays)?  yes, please provide details:  e there are reasons that would prevent you from working reasonable extra hours as quired?  yes, please provide details:  yes, please provide details: | Yes / No Yes / No       |

Do you have any difficulty holding a conversation in English?

Yes / No

| <ul> <li>Do you speak any languages other t</li> </ul>                                                                           | than English?                                        | Yes / No                              |
|----------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------|---------------------------------------|
| If yes, please provide brief details:                                                                                            |                                                      |                                       |
| <ul> <li>If your application were successful,</li> </ul>                                                                         | when would you be able to commence?                  | /                                     |
| Section 9 IMPORTANT – PLEAS                                                                                                      | E READ                                               |                                       |
| I certify that the information I have given<br>information, or if I have left out any import<br>my employment may be terminated. |                                                      | =                                     |
| I further accept that if I am successful in gathered in the course of my employmen                                               |                                                      | ined herein and any other information |
| Full Name: (please print)                                                                                                        | Signature:                                           |                                       |
| Date: /                                                                                                                          |                                                      |                                       |
|                                                                                                                                  | Thank you for completing this form.                  |                                       |
| Checklist:                                                                                                                       |                                                      |                                       |
| Have you attached a covering letter?                                                                                             | Have you attached copies o                           | f licenses/ qualifications?           |
| Have you attached a copy of your C.V?                                                                                            | Have you attached copies o permit/residency document | · —                                   |