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### **MAORI WOMEN’S WELFARE LEAGUE INC**

**APPLICATION FORM**

**Position Applied For:**

☐ Contracts Manager

☐ Project Lead

☐ Events Manager

☐ Office Administrator

**Title**

☐ Ms.   ☐ Mrs.   ☐ Dr.   ☐ Prof.

Other:

**First Name**

**Surname**

**Contact Information**

Address:

Address 2:

City/Town:

Post Code:

Email Address:

Mobile Number:

**Employment History (last 5 years)**

**Please list your current and most recent Employer**

Employer

Position Held

Dates employed – From…………………To…………….

Key responsibilities

Employer

Position Held

Dates employed – From…………………To…………….

Key responsibilities

**Skills and Experience.**

Briefly outline how your skills and experience match the role you are applying for:

**If you have not included referee details in your CV, please detail them below. Referees will not be contacted without seeking your consent first.**

**Referee Details**

Name:

Company:

City/Town:

Country:

Email Address:

Phone Number:

Relationship:

**Referee Details**

Name:

Company:

City/Town:

Country:

Email Address:

Phone Number:

Relationship:

**Additional Information**

Do you have any medical or health conditions that may affect your ability to perform the duties of the role?

Yes

No

If yes please provide details.

Have you ever been convicted of any offence against the law, in New Zealand or any other country?

Yes

No

Do you have any criminal charges pending, in New Zealand or any other country?

Yes

No

If the answer to either question is YES, please provide full details, including the date and nature of the charges (and the expected hearing date if applicable):

(Please note: A false declaration about prior convictions and/or pending prosecutions will invalidate your application.)

Our organisation is a smoke-free workplace. Staff are required to comply with our Smoke-Free Policy during work hours and on work premises

**Consent to conduct pre- screening interviews.**  
  
I <Name Surname> certify that the information provided in this form and any subsequent information provided to support the detail on this form is complete and accurate in all respects. I give permission to Atahaia Consultancy Limited to perform pre- screening interviews to verify the information I have provided for the role I have applied for.

I consent to the use, disclosure and handling of both my personal information for the purpose of this recruitment process and in accordance with the Privacy Act 2020.

Full Name:

Date:

**Attach your completed application form with your cover letter and CV and forward to Lyn Harrison at** [**atahaia@actrix.co.nz**](mailto:atahaia@actrix.co.nz)