Document Title: Recruitment Application Form

scan and email to jackie.c@tranzliquid.co.nz

Email



Please complete in your own handwriting and return to one of the following: Post Tranzliquid, PO Box 4046 Mt Maunganui South, 3149

Your name: Middle Last Address_ residential Contact No. _phone number. Email address _ Are you legally eligible for employment in NZ? YES NO Are you seeking a permanent position? Yes No Are you available to work shift roster which includes day and night shift rotations? Yes No Do you hold a current Dangerous Goods Endorsement? Yes No Do you have any experience operating fuel tankers? Yes No Are you prepared to wear uniform issued? Yes No How many years' experience do you have driving Heavy Vehicles? (Class 5 licence) How many demerit points do you currently have against your licence? For health and safety, we need to ask: Do you have any hearing impairment? Yes No Do you have color vision deficiency? Yes No Do you have good physical mobility? Yes No Do you have any sleep disorders that you are aware of? Yes No Do you have any health or medical conditions / restriction specified on your licence? Yes No Do you smoke? NEVER / SOCIAL / DURING THE DAY Tranzliquid has a drug and alcohol policy which includes pre-employment drug testing. signature You will be required to undergo and have a NON-NEGATIVE (pass) drug test on the first day. FAILURE WILL RESULT IN IMMEDIATE WITHDRAWAL OF JOB OFFER. Sign in this box to indicate that you agree to accept Tranzliquid policy and drug testing. For the position at Tranzliquid a full employment medical is conducted: By signing this application, you agree to a full employment medical as part of condition of Yes No employment.

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For the position as a transport operator for Tranzliquid the candidate must hold current drivers licence and relevant endorsements. A copy of your driver's licence may be requested as part of the pre-employment process.

By signing this application, y	ou agree to Tranzliquid conducting a driver's licence check.	Yes	No)
Drivers Licence number	Licence version number	_		
In the last 12 months what was your biggest learning?				
What did you change as a result of this learning?				
Based on your knowledge of our business and this role, describe your qualities that are most relevant?				
Health & Safety Give an example of a hazard you identified and what you did about it.				
Please describe yourself – tell us about you as a person, what makes you laugh, what inspires you to get up in the morning, and why you think you are the right person for this position.				
ANY ADDITIONAL INFORMATION ?				
A CV has been provided v	vith this application.		YES	NO
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Review Date: July-19

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CHARACTER REFERENCES

Provide two references who are not relatives,	who we can	contact regarding y	your application fo	r employment a
Tranzliquid.				

Name	phone no.	relationship	years known
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Employer Name: Address: By signing this application for signature NOTE: If your application is:	m you accept that the information provided is a	Prom: To: Reason fo	r leaving: