

EMMERSON TRANSPORT LTD

Date :/							
Application for employment I wish to be considered for	emplovment	and agree	to this	informat	tion beina	used	for this
purpose.	cinpleyment	and agree				uocu	
Position Applied for :-							
Name							
Contact No. (Home)							
Address				Age _			
Next of Kin Name				Conta	ct No		
Relationship(Mother, Father e	tc)						
Licenses Held / / /	, , ,	, ,		٦	Diago at	ttach co	nico
Licences Held//				}	Please at	<u>ctacii co</u>	<u>ipies</u>
Licence Number Forklift certificate		Yes / No		٦	<u>Please at</u>	ttach co	nioc
		-		}			
Dangerous Goods Certificate Bridge Self Supervision Certifi	cato	Yes / No Yes / No		}	Please at		•
Bridge Self Supervision Certifi Please fill in the tick sheet atta		•		}	<u>Please at</u>	<u>ctacii co</u>	<u>ipies</u>
riease III III the tick sheet atte	ached with pre	vious veriici	e types t	iiiveii.			
Have you incurred any speedi	ng fines or oth	er traffic inf	ringemer	nts in the	past thre	e years	?
	If yes , give de		3		•	,	
	, , 5						
I agree to have an LTSA driv ETL's operator list for ongoing		eck carried Yes / N		for my	details to	be inclu	uded or
Have you been involved in any	y vehicle crash	es in the pa	st three	years?			
Yes No :	If yes , give de	etails:					
I agree to have ETL Insurance	Broker check	for any clair	n details	. Yes /	No		
Have you ever been disqualifie	ed from driving	g due to alco	hol Or d	rug-relat	ed offence	es?	
Yes No	If yes , give de	etails:					
Do you agree to a pre employ	ment drug tes	t?					
Yes No							
Have you ever had any crimin	al convictions?	•					
Yes No	If yes , give de	etails:					

Do you have any Ne	w Zeala	nd Qualification Authority Unit Standards?	
Yes	No	If yes , give details:	
Have you completed	any oth	ner training programmes relevant to the position?	
Yes	No	If yes , give details:	
<u>Marital status</u> □ sin	gle □ m	arried \square defacto \square divorced \square widowed \square separated	
Do you have any all	ergies? y	yes / no type	
Have you had any n	nedical p	problems? yes / no type	
Driver Experience T	ick Shee	<u>t</u>	
I have had experien	ce in the	e following sectors; (please tick)	
		1-5 tonne truck(local work)	
		over 5 tonne(local)	
		truck and trailer (local)	
		tractor and semi-trailer (local)	
		truck only line haul	
		truck & trailer line haul tractor & semi line haul	
		B train line haul	
		Low loader experience	
		Tarping	
		Swing lifting	
		tautliner work	
		flatdeck work	
		tipping work	
		fork lifting	
		agricultural machinery	
		warehousing	
		tyre changing documentation	
		mechanical	
		chaining & twitching	
		over dimension	
		phone / radio telephone communication	
		reversing truck and trailer	
		reversing tractor and semi	
		reversing tractor and B train	
Other (please specif	y)		

EMPLOYMENT HISTORY:

Present Or Last Position:

Employer:		_
Position:		
Address:		
From: To:		
Responsibilities:		
Reason for Leaving:		
Name of Supervisor:		
Position Title:		
Phone:	Email:	
Previous Position:		
Employer:		_
Position:		
Address:		
From: To:		

Responsibilities:	
Reason for Leaving:	
Name of Supervisor:	
Position Title:	
Phone:	Email:
May We Contact Your Past/Present Employ	er for a reference check? Yes / No
Other References:	
Name/Title Address Phone	
	ation is true and complete. I understand that me for employment. I authorize the verification of TL to carry out LTSA Licence and Insurance claim
Signature	Date