

**Administrator**

**Uniting Congregations of Aotearoa New Zealand**

Application Form

**Forenames Surname**

**Email Phone contact**

**Postal address**

**Are you currently employed?** YES / NO

**Please give brief description of current or most recent employment:**

**Tell us how you see yourself as fitted for this role:**

**Relevant qualifications:**

**Referees**

Referees are contacted for information to assess the suitability of candidates for a job. By providing contact details you authorise us to contact them in connection with your application. If we are unable to make contact with a referee we may need to come back to you for alternative names. (Let us know if you do not want us to contact your current employer before a job offer is made).

1. A **professional referee** (e.g. your current or recent employer):

Name Phone

Email

Address

1. A **personal referee** (someone who has known you for a long time):

Name Phone

Email

Address

Are you a citizen or permanent resident of New Zealand? YES / NO

Do you have any medical condition or disability that restricts your working? YES / NO
*If ‘YES’, please specify:*

Do you have **any criminal convictions** in the last seven years? YES / NO
*If ‘YES’, please specify:*

Do you have a **church connection**?(It would be useful but not essential to have an existing understanding
 of how churches work. You will be working in company with people
 who have a faith commitment). YES / NO
*If ‘YES’, please specify:*

I declare that, to the best of my knowledge, all information relevant to the job has been provided and nothing has been left out. I understand that if any false information is given, or any material fact suppressed, I may not be accepted, or if I am employed, I may be dismissed.

If I attend an interview, I acknowledge that no job offer will be made verbally during the interview, and all the terms of any offer of employment are in a written job offer.

Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please email completed form **by 2 October** to adrian@ucanz.org.nz
*or* mail to: Rev Adrian Skelton, UCANZ, PO Box 12 046, Wellington 6144