

Do you want a non-legal position with us?

Please complete all sections of this form, then sign and date it.
Attach your CV and letter of application. Your CV should be in A4 format and stapled. It should include details of your current employer, position and responsibilities and list previous employers, dates of employment, positions held and reasons for leaving. Your CV and attachments will not be returned.

Your Application Details

Position applied for

Office applied to Christchurch Dunedin Queenstown Any

Date available to start employment

Have you previously held a position at Anderson Lloyd? Yes No

Your Personal Details

(Please circle your preferred name)

Full Name

Telephone Day Mobile

Email address

Postal address

Your Entitlement To Work In New Zealand

Are you a New Zealand citizen? Yes No

If no, what is your residency status?

If no, are you legally entitled to work in NZ? Yes No

If you require a Work Visa please state Work Visa No Expiry Date

Your Education

Highest qualification

Name of institute

Other training / certificates / qualifications

If not already supplied, please attach an official transcript (or certified photocopy) of your academic qualifications, including grade awarded

How Did You Hear About Us?

How did you learn of this vacancy (e.g. recruitment agency, media?)

If applicable please name the recruitment agency

If applicable please state the type of media Please specify

Publication	<input type="text"/>	Journal	<input type="text"/>
Internet	<input type="text"/>	Other	<input type="text"/>

Do You Have Any Criminal Convictions?

Have you ever been convicted of any criminal offence, or do you have any criminal charges pending? (Minor traffic offences such as parking or speeding can be excluded) If so, please list each conviction (and the sentence imposed) or pending charge

Yes No

Do you consent to providing us with a Ministry of Justice Convictions Report

Yes No Continue separately if necessary

Your Health

Do you have, or have ever had, any known injury or medical condition which may affect your ability to effectively carry out the full range of the functions and responsibilities of the position applied for, or may be contributed to or aggravated by this position? If so, please provide details

Yes No

Are you on medication which could affect your performance in the job?

Yes No Continue separately if necessary

Your Referees

Please provide contact details of two work related referees we may contact

1. <input type="text"/>	2. <input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>

Directorships

For professional conflict reasons, please list any directorships or trusteeships you currently hold

Continue separately if necessary

Anderson Lloyd Connections

Do you have, or have you had, any significant connections through your work or personal relationships with anyone at Anderson Lloyd?

If yes, please provide details

Continue separately if necessary

Declaration & Signature

- I agree to Anderson Lloyd retaining this application for further reference.
- I consent to Anderson Lloyd contacting any referees named in this form to obtain from them information about me in connection with this appointment.
- I consent to Anderson Lloyd communicating and obtaining information about me from academic institutions included in this form or in my curriculum vitae in order to confirm my qualifications.
- I consent to Anderson Lloyd communicating and obtaining information about me from the New Zealand Law Society or the relevant overseas law society to confirm my professional record as detailed in this form.
- I acknowledge that the written comments and assessments on my suitability, interview notes, referee comments and psychological assessment comments will be deemed evaluative and therefore confidential to Anderson Lloyd.
- I declare that the statements made in this form and the attached curriculum vitae are true and complete, and that I am not aware of any conditions or situations not stated in this form which may affect my ability to carry out the functions and responsibilities of this appointment. I also understand that any false information or deliberately misleading information has been given, or I have omitted any important information, I may be disqualified for appointment, or if appointed, this may lead to the termination of my appointment. I also understand that information about this appointment will be treated confidentially.

Signature

Date

Privacy Act Statement

The information which you supply on this application form, along with your curriculum vitae and supporting documents, is solely used to assess your suitability for employment with Anderson Lloyd. If successful, the information you provide will be held in Anderson Lloyd personnel files. Information on unsuccessful candidates will be confidentially destroyed either when 12 months has lapsed from the date of your application, or as soon as the information is no longer required.

You have the right to view your personal information held by Anderson Lloyd, and may request correction if necessary.