



## APPLICATION FOR EMPLOYMENT

*This application must be completed personally by the applicant and in full in handwriting. Failure to supply any of the information requested might prejudice our ability to assess your suitability for employment which may include subsequent changes in employment with the Company. The completion of this form does not indicate that there is any obligation on the Company to engage the applicant.*

**POSITION APPLIED FOR:**

Job Title \_\_\_\_\_

If the position is fixed-term, please confirm that you understand the commencement date, expected duration and nature of the fixed-term employment.: Yes  consider me for the fixed term position, if applicable

**PERSONAL DETAILS:**

Full Name \_\_\_\_\_

Preferred Name \_\_\_\_\_

Are you known by any other names? Give details \_\_\_\_\_

Address \_\_\_\_\_

Home Phone No:		Daytime Contact No:	
Mobile Phone No:		Email address:	

Have you reached the current school leaving age? Yes  No

<b>EDUCATION/QUALIFICATIONS ACHIEVED OR PARTLY ACHIEVED INCLUDE ANY OTHER TRAINING RELEVANT TO THE POSITION</b>		
Trade Qualification	Where Completed (Employer and training institute) <small>(if incomplete record as PARTIAL in Year Completed)</small>	Year Completed
New Zealand Trade Certificate		
Qualification Name		
Overseas Trade Qualification		
Qualification Name		

Have you had your overseas trade qualification assessed for suitability under the Green List criteria. If yes, please submit result.		Yes <input type="checkbox"/> No <input type="checkbox"/>
Degree, Diploma, Certificates, Secondary School Subjects & Grades if that is your highest level of achievement.	Where Completed (Employer and training institute) (if incomplete record as PARTIAL in Year Completed)	

**LEGAL WORK STATUS**

Are you currently legally entitled to work in New Zealand? Which of the following applies:

NZ Citizen     NZ Resident     Open Work Visa     AEWV Visa with employer restrictions:     Working Holiday Visa

If you need a visa to work for CoolCar, which of the following apply in your circumstances?

Variation of an existing work visa     Job Offer to apply for AEWV Visa     Working Holiday Visa

If appointed, please produce originals for sighting.

<b>Are you currently in New Zealand?</b>	Yes <input type="checkbox"/> No <input type="checkbox"/>
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HAMILTON  
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coolhq@coolcar.co.nz

**PREVIOUS WORK HISTORY**

- Your full employment record is required, continue on another sheet if required
- Show present/most recent position first (it is important that dates are as accurate as possible).
- Your present employer will not be contacted without your approval regarding this application.

From	To	Employer & Address	Position/Status	Reason for leaving

**TECHNICAL APPLICATION SUPPORT show us how you are suitably qualified for the role**

**Do you have at least two years of automotive air-conditioning experience?** Yes  No

**What best describes that experience: pick one**

- It was predominantly in specialist automotive air-conditioning business(es)?
- It was incidental to my work in a general automotive workshop or auto electrical business and formed a small part of my work?

Please describe the skills you hold that are relevant for the position applied for by giving specific examples of relevant work you have performed to show your level of exposure and understanding – for example for a technical role’ diagnosis of faulty clutch cycling relay causing intermittent AC fault in Toyota, Subaru and Honda. Just saying AC de-gas/re-gas will not show us what you can do.

1. Describe the most technically difficult fault you have diagnosed:				
On the refrigerant side of the system:				
On the electrical side of the AC system:				
2. Describe the repair/job you are most proud of				
3. Which of the following do you have genuine experience with?				
De-gas/re-gas <input type="checkbox"/>	R513 <input type="checkbox"/>	R134a <input type="checkbox"/>	R1234YF <input type="checkbox"/>	R744 <input type="checkbox"/>
Agricultural Equipment AC <input type="checkbox"/>	Refrigerated transport <input type="checkbox"/>	Hybrid vehicle AC <input type="checkbox"/>	Electric vehicle AC <input type="checkbox"/>	Truck AC <input type="checkbox"/>
Caravan/RVs roof top AC <input type="checkbox"/>	Caravan/RVs diesel heaters <input type="checkbox"/>	Auto electrical diagnosis of AC <input type="checkbox"/>	Auto electrical diagnosis of other systems <input type="checkbox"/>	CANBUS <input type="checkbox"/>
Making refrigerant hoses <input type="checkbox"/>	Aluminium Welding <input type="checkbox"/>			

4. What AC leak detection methods have you used:				
Electronic refrigerant leak detection <input type="checkbox"/>	Nitrogen pressure testing <input type="checkbox"/>	Vacuum testing <input type="checkbox"/>	Forming gas/Loktrace <input type="checkbox"/>	
UV Dye <input type="checkbox"/>	Bubble leak detection <input type="checkbox"/>			
Which method have you the most experience with and which is your preferred method? _____ and _____.  In you opinion, which method finds most leaks? _____				
5. How much refrigerant loss do you consider significant? _____				
6. What equipment are you familiar with:				
Scan tools <input type="checkbox"/>	Oscilloscopes <input type="checkbox"/>	Integrated recovery, recycling, recharging machines <input type="checkbox"/>		
Individual:	Vacuum pumps <input type="checkbox"/>	Recycling equipment <input type="checkbox"/>	Recovery stations <input type="checkbox"/>	
Manifold gauges <input type="checkbox"/>	Refrigerant identifiers <input type="checkbox"/>			
7. Has your automotive air-conditioning experience been mostly mobile or workshop based?				
8. Can you diagnose and repair vehicle AC systems without supervision or have you been typically directed on what repairs to undertake by another diagnostician?				
9. Which of the following repairs have you carried out:				
Condenser replacement:	0 <input type="checkbox"/>	< 10 <input type="checkbox"/>	10-100 <input type="checkbox"/>	> 100 <input type="checkbox"/>
Evaporator replacement: Toyota, Subaru, Honda etc	0 <input type="checkbox"/>	< 10 <input type="checkbox"/>	10-100 <input type="checkbox"/>	> 100 <input type="checkbox"/>
Mercedes, BMW, Skoda etc	0 <input type="checkbox"/>	< 10 <input type="checkbox"/>	10-100 <input type="checkbox"/>	> 100 <input type="checkbox"/>
Chevrolet, Ford, Dodge, Jeep etc	0 <input type="checkbox"/>	< 10 <input type="checkbox"/>	10-100 <input type="checkbox"/>	> 100 <input type="checkbox"/>
Kia, Hyundai etc	0 <input type="checkbox"/>	< 10 <input type="checkbox"/>	10-100 <input type="checkbox"/>	> 100 <input type="checkbox"/>
Compressor replacement:	0 <input type="checkbox"/>	< 10 <input type="checkbox"/>	10-100 <input type="checkbox"/>	> 100 <input type="checkbox"/>
Compressor repairs: Bearings <input type="checkbox"/>	Shaft seals <input type="checkbox"/>	Body Seals <input type="checkbox"/>	Control valves <input type="checkbox"/>	Shear plates <input type="checkbox"/>
TX valve replacement:	0 <input type="checkbox"/>	< 10 <input type="checkbox"/>	10-100 <input type="checkbox"/>	> 100 <input type="checkbox"/>
Solvent flushing:	0 <input type="checkbox"/>	< 10 <input type="checkbox"/>	10-100 <input type="checkbox"/>	> 100 <input type="checkbox"/>
Desiccant bag replacement:	0 <input type="checkbox"/>	< 10 <input type="checkbox"/>	10-100 <input type="checkbox"/>	> 100 <input type="checkbox"/>
10. Referring to the job description, tell us how you will add value to the business:				

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11. What interested you in this position?

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Please describe the workplaces you have worked in that have done work that is relevant to this role – ie clientele, types of vehicles, types of work undertaken, whether mobile, workshop based or both:

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**For technical roles, please provide photos, if you have them, of vehicles you have worked on showing the work in progress**

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If your application were successful, when could you commence employment? \_\_\_\_\_

**SEASONALITY & AVAILABILITY**

CoolCar Air-Conditioning & Heating is a summer-seasonal business. It is a requirement that staff are available to work additional hours, including rostered Saturday hours over this period, and occasionally in the off-season.

Are you prepared to work additional hours as required?	Weekdays	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
	Saturdays	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>

Have you worked overtime hours before?

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**AVAILABILITY: please refer to the job advertised for our expectations**

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**Where** this position requires reliable attendance at rostered start and finish times (including overtime in accordance with the availability provisions), and the ability to work at either our Auckland or Hamilton branches (transport and paid inter-branch travel provided), including overnight stays where required to meet operational requirements (accommodation provided), are you able to meet these requirements?

Yes     No     N/A

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**Where** the employment agreement includes availability provisions, do you acknowledge that you may be required to work additional hours upon request up to the number of hours specified in the agreement, and that compensation to make yourself available is included in your remuneration? Overtime is paid at your normal hourly rate.

Yes     No     N/A

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### CURRENT NEW ZEALAND OR INTERNATIONAL DRIVER'S LICENCE

Do you hold a current driver's licence in NZ or overseas that will allow you to drive in New Zealand upon commencement of employment? Yes  No

If appointed, please produce for sighting

As this may impact your ongoing entitlement to drive and maintain insurance for company and client vehicles:

Record any current demerits:

Record any losses of licence:

Record any pending court action relating to your driving:

Have you ever been refused motor vehicle insurance Yes  No

**If yes, provide details**

### GENERAL

Do you have a spouse, partner, relative or household-member working here or elsewhere in the industry? Yes  No

If yes, who? \_\_\_\_\_

Where? \_\_\_\_\_

Where? \_\_\_\_\_

Are you a member of any territorial force unit? Yes  No

If yes, have you completed whole time training? Yes  No

### CREDIT AND BACKGROUND CHECK

Administrative staff may be required to undergo a credit and background check. Do you consent to undergo a credit and background check as part of our pre-employment processes?

Yes  No

## REFEREES

Please provide **accurate names and postal addresses** of three people who have agreed to act as your referee and from whom we may request a written or verbal reference report (Referees will need to be in a position to comment on your employment history/education/technical abilities).

By supplying the names of these people we will:

1. assume that you have advised and given these referees your permission to disclose information about you
2. seek information from these referees on the basis that the referees will supply the information in confidence as evaluative material for the purposes of the Privacy Act 1993 and that any information supplied by the referee will not be disclosed to you should you request access to it.

1.	Name:	Day Phone:
	Address:	Alternative Contact No:
		Night Phone:
		Email:
Position of referee (eg employer etc)		Fax No:
2.	Name:	Day Phone:
	Address:	Alternative Contact No:
		Night Phone:
		Email:
Position of referee (eg employer etc)		Fax No:
3.	Name:	Day Phone:
	Address:	Alternative Contact No:
		Night Phone:
		Email:
Position of referee (eg employer etc)		Fax No:
NAME OF APPLICANT:		Signature:

**MEDICAL**

- If you are offered employment the offer may be subject to your obtaining a full medical clearance following the completion of our pre-employment medical.

This will include hearing, vision, musculo-skeletal assessment and drug screen

- Do you agree to undergo a medical examination?      Yes       No
- Have you had significant time off work (within the last 2 years) as a result of an illness, injury or infection that may affect your ability to perform the job applied for?  
 Yes       No       If yes, please give brief details including estimate of time off, year of occurrence and reason.

- Do you have, or have you had, a Gradual Process illness, injury, disease or infection that may affect your ability to perform the job applied for? For example, hearing loss, sensitivity to chemicals.  
 Yes       No       If yes, please briefly describe the circumstances

- Do you have, or have you had a repetitive strain injury that may be aggravated or further contributed to by the tasks of this job?  
 Yes       No       If yes, please briefly detail

- |   |  |
|---|--|
| • For technical roles, are you able to lift 35 kg, if required? | Yes <input type="radio"/> No <input type="radio"/> |
|---|--|

- Are there any other conditions (physical, psychological or other) that may affect your ability to complete the tasks of the job you have applied for, which we should be aware of?  
 Yes       No       If yes, please explain

- Are you prepared to handle all products/materials and equipment used in the industry?  
 Yes       No       If no, please explain

- Are you prepared to attend vehicles in the field and at client's premises for the purposes of assessment and repair?  
 Yes       No       If no, please explain

**DECLARATION**

I declare that the information I have given is correct and understand that any incorrect or misleading information may lead to disqualification, or if appointed, to termination of employment.

Applicant's signature:

Date:

**PRIVACY STATEMENT**

This information is collected to allow us to process your application for employment, to ensure all topics we are interested in are covered so we can assess your suitability as an employee. In the event that your application is successful, this information will be kept throughout your employment and discarded six years after you are gone. During the period of employment if successful, this information may be used for administration and personnel management purposes as and when required.

Documentation relating to unsuccessful applications will be kept for six months after the position is awarded to the successful applicant. Following that, it will be destroyed in a secure manner.

You may request access to and correction of your staff record, by writing to The Manager.

Your response to the above questions will be considered in conjunction with the position description of the job applied for, the job tasks, and your completed application to determine whether there is any significant impediment to employment.

Do you consent to the Company retaining the information contained in this application form for the purposes of considering your suitability for any other position which may arise with this Company in the future?  
Yes/No