

## **Application Form**

# **New Zealand Defence Adviser Office Manager**

Please complete this application form and attach a current curriculum vitae (CV) and cover letter addressing the criteria in the position description.

In your cover letter, please briefly describe:

- the reasons for your interest in the role, and,
- your key areas of expertise in relation to the 'Qualifications, Skills and Experience' requirements set out in the position description.

#### **Personal details**

Full name	
Address	
Phone (mobile or other)	
Email	
Citizenship	

How did you learn of this vacancy?			
New Zealand High Commission website		Facebook	
Matangi Tonga		Word of mouth	
What's on in Tonga		Other (please state)	

### **Security clearance**

Prior to taking up an appointment with the New Zealand High Commission, applicants are required to provide a police clearance.

Have you been convicted of a criminal offence offence (apart from minor traffic offences)?	YES / NO
If you answered yes, please provide a brief explanation:	

#### Health

The New Zealand Defence Adviser Office has a proactive health and safety approach to identify and manage hazards and to promote health and safety at work. We need to ensure that you have an understanding of the demands associated with working for the New Zealand Defence. Your responses to this section will not necessarily disqualify you from employment.

discomfort, gradual process in	re you suffered in the past, from any or discomfort (including keyboard jury, hearing) or mental health ability to perform the functions and you are applying for?	YES / NO
If you answered yes, please	e provide a brief explanation:	
Referees		
Please identify three referees w	ho are willing to be contacted for professi	onal or personal
-	be a current or previous employer or ma	•
provide a telephone number an	d an email address for each referee.	_
Full name		
Role/Title		
Role/Title Phone (mobile or other)		
-		
Phone (mobile or other)		
Phone (mobile or other) Email		
Phone (mobile or other)		
Phone (mobile or other) Email		
Phone (mobile or other) Email Full name		
Phone (mobile or other)  Email  Full name  Role/Title		
Phone (mobile or other)  Email  Full name  Role/Title  Phone (mobile or other)		
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Phone (mobile or other)  Email  Full name  Role/Title  Phone (mobile or other)  Email		
Phone (mobile or other)  Email  Full name  Role/Title  Phone (mobile or other)  Email  Full name		

Declaration a	and S	igna	ture
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incorrect or misleading information or if I have omitted any important information I may be disqualified from appointment, or if appointed, be liable to be dismissed.		
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Please email the **completed application form**, a **current CV** and **cover letter** to <a href="mailto:nzhctonga@mfat.govt.nz">nzhctonga@mfat.govt.nz</a>; or deliver to: the Reception Desk, New Zealand High Commission, Corner Taufa'ahau and Salote Roads, Nuku'alofa

#### Privacy

The information you have provided will be protected. Personal information is required only for the purpose of assessing your application and will be retained, used and disclosed only in accordance with the New Zealand Privacy Act.