

APPLICATION FORM TO WORK AT LAKEWOOD LODGE

WHEN ARE YOU PLANNING TO VISIT US?

HOW LONG DO YOU HOPE TO STAY WITH US? _____

HOW LONG DO YOU PLAN TO STAY IN NEW ZEALAND? _____

NAME: _____

ADDRESS: _____

PHONE NUMBER: (INCLUDE COUNTRY CODE): _____

CELLPHONE NUMBER: _____

NATIONALITY: _____

EMAIL ADDRESS: _____

DATE OF BIRTH: _____ **MALE/FEMALE (DELETE ONE)**

NAME & PHONE NUMBER IN CASE OF EMERGENCY

EXPERIENCE

HAVE YOU:

A) WORKED WITH CHILDREN? _____ **WHERE?** _____

B) HORSE TREKKING? _____ **WHERE?** _____

C) KAYAKING EXPERIENCE? _____ **WHERE?** _____

D) ANY OTHER OUTDOOR EDUCATION EXPERIENCE?
WHERE? _____

KITCHEN EXPERIENCE? _____ **WHAT?** _____

CAN YOU COOK? _____

DO YOU HAVE A FIRST AID CERTIFICATE? _____ **If not are you able to get one before you come here?** _____

DO YOU HAVE A LIFESAVING QUALIFICATION? _____

DO YOU SMOKE? _____ **SPECIAL DIET?** _____

DO YOU HAVE FACIAL PIERCINGS? _____ **IF YES PLEASE**

ITEMISE _____

HEIGHT _____ **WEIGHT** _____ **Please email a current photo.**

I agree that I will work 25 hours per week at Lakewood Lodge in return for board and keep wherever I am directed by the Lodge Manager. I understand that I will be paid a small wage in addition to this when the Lodge has group bookings. I agree to fit any travelling I may wish to do around the Lodge's booking in consultation with the Lodge Manager. I understand that one week's notice can be given by myself or the Lodge Manager if I am not suitable for the position. I agree to these conditions

SIGNED _____

DATE _____