

Recruiting Headquarters  
Devonport Naval Base  
Private Bag 32901  
Devonport  
**AUCKLAND**



**W**

AREA RECRUITERS STAMP ONLY

## ROYAL NEW ZEALAND NAVY INITIAL APPLICATION FORM

### Section 1: Personal Details

Surname:		Gender	M / F	*circle one
First Names:		Date of Birth:		
Residential Address:				
		Country of Citizenship:		
Suburb/Town		NZ Resident:	Y / N	
City		If NZ Resident, for how long?		
Postal address: (if different from above)		Phone:	Home ( )	
		Phone:	Work ( )	
Suburb/Town		Phone:	Mobile	
City		E-mail Address:		

Why do you want to join the Royal New Zealand Navy?

Entry Type	Careers Available			
	Tick the Trade and Scheme you are interested in			
Sailor	Combat System Specialist	Communications Operator	Seaman Combat Specialist	
	Hydrographic Systems Operator	Electronic Warfare Specialist	Diver	
	Marine Technician	Electronic Technician		
	Writer (Office Administrator)	Steward	Chef	
	Stores Accountant	Medical Assistant	Musician	
Specialist Officer	Construction Engineer	Medical Officer	Education Officer	
	Organisational Psychologist	Chaplain	Legal Officer	
General List Officer	Non-University		University Sponsorship Scheme	Graduate
	Seaman		Seaman	Seaman
	Hydrographic Surveyor		Hydrographic Surveyor	Hydrographic Surveyor
	Supply		Marine Engineer	Marine Engineer
	Pilot		Weapons Engineer	Weapons Engineer
			Supply	Supply
Naval Volunteer Reserve	Seaman	Support (Administration)	Engineering	
	Naval Control of Shipping			

**Section 2: Security / Health**

Have you ever been tested for the Regular Force Navy, Army or Air Force before: Yes/No  
 (If Yes, state when, where, and with which Service): \_\_\_\_\_

Have you ever been brought before a Court, had any Convictions, or been placed on a Diversion Scheme? Yes/No  
 (If Yes give details): \_\_\_\_\_

Have you ever had any illness or injury which required continual medical attention or treatment (e.g. Asthma, Diabetes, Migraines, Epilepsy (fits or seizures) or Back/Joint problems etc.)? Yes/No  
 (If Yes give details): \_\_\_\_\_

Have you ever been admitted to hospital? Yes/No  
 (If Yes give details): \_\_\_\_\_

Have you any illness or condition that you think may preclude you from military service Yes/No  
 (If Yes give details): \_\_\_\_\_

Have you ever worn glasses or contact lenses? Yes/No  
 (If Yes give details): \_\_\_\_\_

Have you ever had any hearing problems? Yes/No  
 (If Yes give details): \_\_\_\_\_

What is your Weight? \_\_\_\_\_ Kilograms      What is your height? \_\_\_\_\_ Metres

**Section 3: Education** Please attach copies of all qualifications gained (include transcripts), including SC, 6<sup>th</sup> Form, Bursary, NCEA, Tertiary or Degree (Copies of originals can be made by your local Recruiting Team).

What Secondary School(s) did you attend? Secondary School Town/City

\_\_\_\_\_

\_\_\_\_\_

**Section 4 Employment** Please list employment details for the last 5 positions held, if any. Include current position.

<u>Employer</u>	<u>Position Held</u>	<u>From</u>	<u>To</u>	<u>Reason for Leaving</u>

**I understand this application places me under no obligation, nor does it guarantee employment.**

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**PLEASE RETURN THIS INQUIRY FORM TO RECRUITING HEADQUARTERS, THE ADDRESS IS LISTED TOP LEFT, FRONT PAGE**

- Notes:**
1. I understand that the information recorded on this form will be treated in accordance with the provisions of the Privacy Act 1993.
  2. The information on this form is required for Recruitment purposes and statistical analysis.
  3. The information on this form will be used only by personnel involved in the Recruitment process.
  4. My personal information will be treated in confidence, and I will have the right to access and correct any recorded details.
  5. If I have previously made application to the New Zealand Air Force or Army, my signature above confirms I consent to any information held by them being made available to the RNZN in consideration of this inquiry.



FOR STATISTICAL PURPOSES ONLY									
This section is designed to provide information to the Navy about the people we have applying. This helps us meet our commitments as an Equal Employment Opportunities employer. You do not have to complete this section if you do not wish but it would be appreciated. This section will be removed by the Recruiter and is used only for research.									
Gender:*	Male		Marital Status:*	Single		Age on Application:*	<16		
	Female			De-facto			17-19		
				Married			20-22		
				Separated			23-25		
				Divorced			26-28		
				Widowed			29-31		
				Living with a Partner			32>		
Number of Dependents:			Religion:						
Ethnic Origin:*	NZ Maori		Employment Status:*	Student	- Full time				
	NZ European				- Part time				
	NZ Pacific Islander			Employed	- Full time				
	NZ Asian				- Part time				
	NZ Indian			Unemployed					
	European			Beneficiary					
	Pacific Islander			Other: please specify					
	Asian								
	Indian								
	Other: please specify								

**Note:**

\* Please place a ✓ in the box that best describes you.

FOR RECRUITING OFFICE USE ONLY									
Please place a ✓ in the appropriate box. ☆ Please place the year									
Recruiting Area:	Auckland		Month Received in Recruiting Office:	January		August			
	Tauranga			February		September			
	Wellington			March		October			
	Christchurch			April		November			
	Dunedin			May		December			
				June		Year ☆			
				July					