

Request for Candidate Form

Confidential

Employer Details

Date: _____

First Name: _____

Last Name: _____

Company: _____

Address: _____

Email Address: _____

Phone Number: _____

Position Available / Job Title: _____

Full Time Part Time

Start Date: _____ Salary Range: _____

Job Description: _____

Candidate Required

Education / Training Requirement: _____

Skills Required: _____

Other Requirements: _____

Declaration:

This information will be kept confidential along with all other personal records, as required by the Health Information Privacy Code (1993)

Signed: _____ Date: _____

Please send completed form to: - **Geneva Elevator: PO Box 106339, Auckland 1143, New Zealand.**
Email to enquiries@genevaelevator.co.nz . Fax: (09) 529 1409

Any queries, Call Free 0508 353 828 or (09) 531 5600.