

POSITION DESCRIPTION – COOK

September 2022

- **Correct uniform to be worn to the highest standard of personal hygiene, with special reference being made to footwear;**
- Hours of work to be arranged;
- Employed during the school term, which totals approximately 36 weeks, with further school holidays offering further work when available;
- Further work may be offered in school holidays dependant on the College's hiring programme. Work in the holidays is not guaranteed;
- The preparation, cooking, presentation and serving of the boarders' meal, showing a high standard of skill and flair;
- Assist the Catering Manager with functions that are associated with the College's catering facilities. This may involve extra hours;
- When time allows, preparation should be done for the following day or shift;
- Other tasks that arise from time to time that are associated with general kitchen duties;
- The Weekend Cook is employed under the conditions of St Andrew's College Domestic Employees' Contract.

DAILY CHECKLIST

- To keep up to date records, as outline in the St Andrew's College Food Safety Programme;
- Detailing of tasks to Kitchen Assistants working on the evening shift, as necessary;
- To assist with and delegate cleaning tasks, when necessary, to ensure high hygiene standards are met within both the Kitchen and Dining Room;
- Turn off any equipment, and lock fridges and dry stores.

St Andrew's College – Application Form

Please note: Issues can arise if this PDF form is completed using PDF readers other than Adobe Reader or Adobe Acrobat.

Position applied for: _____

Personal details

Title: ☐ Mr ☐ Mrs ☐ Ms ☐ Miss

Surname: _____ Given Names: _____

Full Postal Address: _____

Contact Telephone: _____

Email Address: _____

Date of Birth: _____

Present Position

Business: _____

Date Appointed: _____

Nature of Appointment:

☐ Full time

☐ Part time

Referees

Please provide the names and contact details of three referees below.
Any referee's report will be confidential.

PLEASE NOTE – CONTACT WITH REFEREES WILL BE MADE ONCE APPLICANTS HAVE BEEN SHORTLISTED FOR INTERVIEWS.

Referee details:

Title: ☐ Mr ☐ Mrs ☐ Ms ☐ Miss

Surname: _____ Given Names: _____

Position: _____

Full Postal Address: _____

Contact Telephone: Business _____ Private _____

Email Address: _____

Referee details:

Title: ☐ Mr ☐ Mrs ☐ Ms ☐ Miss

Surname: _____ Given Names: _____

Position: _____

Full Postal Address: _____

Contact Telephone: Business _____ Private _____

Email Address: _____

Referee details:

Title: ☐ Mr ☐ Mrs ☐ Ms ☐ Miss

Surname: _____ Given Names: _____

Position: _____

Full Postal Address: _____

Contact Telephone: Business _____ Private _____

Email Address: _____

Declarations

- 1 – I certify that the information given in this application is to the best of my knowledge correct. I understand that this may be verified.
- 2 – In accordance with the Privacy Act, I authorise the General Manager or his delegate to obtain further information from the referees listed in this application.
- 3 – I authorise the General Manager or his delegate to make other enquiries as they see fit in relation to my application.
- 4 – I have, at the bottom of this form, disclosed any criminal convictions or charges I may have, and any disabilities and/or medical conditions which may restrict my ability to perform the role that I have applied for.
- 5 – I confirm that I am legally entitled to work in New Zealand.
- 6 – I agree that you may collect information about me from any source, which relates to my application for employment, except for my current employer who will not be contacted without my express permission. This form is an authority for those people you contact to disclose any appropriate information.
- 7 – I am aware that any information supplied by my referees is evaluative material and that it is supplied to you on the basis that each referee has been promised that their identity, and the information they have provided, will not be revealed to me. I understand that I am not entitled to the disclosure of that information.

Applicant's Signature: _____ Date: _____

DECLARATION BOX

Please disclose any criminal convictions or charges you have, and medical conditions and/or disabilities which may restrict your ability to perform the role that you are applying for: