

The Professional Bar and Restaurant School



STUDENT INTERVIEW / ENROLMENT CHECKLIST

1. **Terms and Conditions of Enrolment** Initials_____
By completing this student interview / enrolment checklist and the enrolment form I understand this constitutes the act of enrolment and I accept all of the terms and conditions within the enrolment form.

2. **Total Fees and Refunds** Initials_____
Course fees: \$7,500; this fee is inclusive of all course materials and workbooks. Please be aware that uniforms are to be purchased by the student and the cost for these is not included in the course fees.
Refunds: A refund of course fees will be available with a written withdrawal letter, up to seven days after the first day of course commencement. An administration fee of either 10% of your course fess or \$500, whichever is lesser, will be charged. After this time has elapsed no refund will be provided.

3. **Trust Account Details & How it Operates – Student Fee Protection** Initials_____
Your fees are held in trust by Public Trust. We operate a draw down system for payment of your fees.

4. **Course Details** Initials_____
Course duration: 40 weeks.
Qualifications/Course Outcome: Level 4 National certificate in Hospitality Studies, as outlined in promotional material and brochure.

5. **Rules and Hours** Initials_____
Course hours and rules and other related disciplinary procedures, as per the student handbook have been sufficiently explained and fully understood.

6. **Selection Criteria** Initials_____
Student is over eighteen years of age and has completed the skills capability assesment.

7. **RPL** Initials_____
Recognition of prior learning policy explained and understood.

I, hereby agree that all the points listed above have been thoroughly explained to me by the interviewing staff member, and I have read and fully understood them all.

Enrolment Officer:

Applicant:

.....
(Signed)

.....
(Signed)

.....
(Printed Name)

.....
(Printed Name)

Date:.....

The Professional Bar and Restaurant School



2008 ENROLMENT FORM

Physical: Ground Floor, 144 – 148 Hobson Street,, Auckland CBD.

Physical: Level 2, 104 Dixon Street, Te Aro, Wellington.

Postal: PO Box 147 076, Ponsonby, Auckland

Postal: PO Box 27271, Marion Square, Wellington

Phone: 0800 22 78 36

Auckland Fax: 09 920 3935

Wellington Fax: 04 915 7091

Welcome to The Professional Bar and Restaurant School. Please read the instructions below carefully before you complete this enrolment form.

INSTRUCTIONS

The purpose of this enrolment form is to obtain from you the information we need to enrol you into a qualification at our organisation. We also need to collect information from you which is required by the Ministry of Education and other Government agencies for statistical and registration reasons. Please fill in the form properly by:

- Completing all sections of the form.
- Printing your answers clearly in pen, or by ticking the box that applies for multi-choice questions.
- Signing the form.
- Attaching to the form additional documentation that is required for Ministry of Education funding purposes. A description of the required documentation is provided on page 5 of the form.

A QUALIFICATION			
1	Please circle the name of the qualification you wish to enrol on for 2007:	National Certificate in Hospitality Level 4 National Certificate in Hospitality Level 5	Office Use
	Qualification Start Date (if known):		
	Qualification End Date (if known):		
2	Have you studied at The Professional Bar & Restaurant School before?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
	If you answered "yes", what was your ID number?		
3	Do you intend to study:	Part time <input type="checkbox"/>	Full time <input type="checkbox"/>
4	Please circle how you heard about us:		
	Radio	Friend	
	Local Paper	New Zealand Herald	
	Expo: Please state which one:	Girls Day Out	
	Internet	Other	

B PERSONAL DETAILS		
5	Print your full legal name: <i>Family Name:</i>	
	<i>Given Name(s):</i>	
6	Preferred first name:	
	Previous name(s) known by:	
7	If you have previously enrolled at this organisation under another name, what was that name?	
8	Preferred title:	Ms <input type="checkbox"/> Miss <input type="checkbox"/> Mrs <input type="checkbox"/> Mr <input type="checkbox"/> Other (Specify):
9	Date of birth: <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 19 <input type="text"/> <input type="text"/>	9 Gender: Male <input type="checkbox"/> Female <input type="checkbox"/>
9	day month year	
10	If you know your NSN (National Student Number), please write it here:	<input type="text"/> <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
11	Citizenship and Residency: You may need to supply evidence of residence or citizenship	Tick the box which best describes your citizenship or permanent residency status. New Zealand Citizen <input type="checkbox"/> NZL Australian Citizen <input type="checkbox"/> AUS New Zealand Permanent Resident <input type="checkbox"/> NZP Other <input type="checkbox"/> Please specify if "Other": <hr/> (For students with dual citizenship, specify the country of citizenship of the passport used to enter New Zealand.)
		If you ticked "Other", please also specify your fee/assistance status. NZ AID Scholarship (incl. Aotearoa, short-term training, and post-graduate) <input type="checkbox"/> 01 Full Fee Paying Foreign Student <input type="checkbox"/> 03 Exchange Scheme approved by Ministry of Education <input type="checkbox"/> 04 Foreign Research Based Post-Graduate <input type="checkbox"/> 06 Military Personnel, Diplomatic Staff or Family, or Persons Associated with Operation Deep Freeze <input type="checkbox"/> 08 On-Shore International PhD student <input type="checkbox"/> 09
		During your time studying in this qualification will you be resident in New Zealand or overseas? In New Zealand <input type="checkbox"/> Overseas <input type="checkbox"/>

<p>12 Ethnicity: What ethnic group(s) do you belong to?</p> <p>You may tick up to three boxes, which apply to you.</p>	<p>NZ European/Pakeha <input type="checkbox"/> 111</p> <p>New Zealand Māori <input type="checkbox"/> 211</p> <p>Samoan <input type="checkbox"/> 311</p> <p>Cook Island Māori <input type="checkbox"/> 321</p> <p>Tongan <input type="checkbox"/> 331</p> <p>Niue <input type="checkbox"/> 341</p> <p>Tokelauen <input type="checkbox"/> 351</p> <p>Fijian <input type="checkbox"/> 361</p> <p>Other Pacific Peoples <input type="checkbox"/> 371</p> <p>British/Irish <input type="checkbox"/> 121</p> <p>Dutch <input type="checkbox"/> 122</p> <p>Greek <input type="checkbox"/> 123</p> <p>Polish <input type="checkbox"/> 124</p> <p>South Slav <input type="checkbox"/> 125</p> <p>Italian <input type="checkbox"/> 126</p> <p>German <input type="checkbox"/> 127</p> <p>Australian <input type="checkbox"/> 128</p> <p>Other European <input type="checkbox"/> 129</p>	<p>Filipino <input type="checkbox"/> 411</p> <p>Cambodian <input type="checkbox"/> 412</p> <p>Vietnamese <input type="checkbox"/> 413</p> <p>Other Southeast Asian <input type="checkbox"/> 414</p> <p>Chinese <input type="checkbox"/> 421</p> <p>Indian <input type="checkbox"/> 431</p> <p>Sri Lankan <input type="checkbox"/> 441</p> <p>Japanese <input type="checkbox"/> 442</p> <p>Korean <input type="checkbox"/> 443</p> <p>Other Asian <input type="checkbox"/> 444</p> <p>Middle Eastern <input type="checkbox"/> 511</p> <p>Latin American <input type="checkbox"/> 521</p> <p>African <input type="checkbox"/> 531</p> <p>Other <input type="checkbox"/> 611</p> <p>Not Stated <input type="checkbox"/> 999</p>
	<p>Please specify if "Other Pacific Peoples", "Other European", "Other Southeast Asian", "Other Asian" or "Other".</p> <hr/>	

<p>13 Iwi:</p> <p>If you identified as New Zealand Māori in question 12, what is the name of your Iwi?</p> <p>You may enter more than one Iwi. If you do not know your Iwi, please enter 'Don't Know'.</p>	<p>Iwi: Rohe (Iwi home area):</p> <p>Iwi: Rohe (Iwi home area):</p> <p>Iwi: Rohe (Iwi home area):</p>
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14	<p>Prior activity:</p>	<p>What was your MAIN activity or occupation in New Zealand at 1 October 2007? You may tick only one box.</p> <table style="width: 100%; border: none;"> <tr> <td style="width: 50%; border: none;"> <i>Secondary school student</i> <input type="checkbox"/> 01 <i>Wage or salary worker</i> <input type="checkbox"/> 03 <i>University student</i> <input type="checkbox"/> 05 <i>College of Education student</i> <input type="checkbox"/> 07 <i>Overseas (irrespective of occupation)</i> <input type="checkbox"/> 09 <i>Wānanga student</i> <input type="checkbox"/> 12 </td> <td style="width: 50%; border: none;"> <i>Non-employed or beneficiary (excluding retired)</i> <input type="checkbox"/> 02 <i>Self-employed</i> <input type="checkbox"/> 04 <i>Polytechnic student</i> <input type="checkbox"/> 06 <i>House-person or retired</i> <input type="checkbox"/> 08 <i>Private Training Establishment student</i> <input type="checkbox"/> 11 </td> </tr> </table>	<i>Secondary school student</i> <input type="checkbox"/> 01 <i>Wage or salary worker</i> <input type="checkbox"/> 03 <i>University student</i> <input type="checkbox"/> 05 <i>College of Education student</i> <input type="checkbox"/> 07 <i>Overseas (irrespective of occupation)</i> <input type="checkbox"/> 09 <i>Wānanga student</i> <input type="checkbox"/> 12	<i>Non-employed or beneficiary (excluding retired)</i> <input type="checkbox"/> 02 <i>Self-employed</i> <input type="checkbox"/> 04 <i>Polytechnic student</i> <input type="checkbox"/> 06 <i>House-person or retired</i> <input type="checkbox"/> 08 <i>Private Training Establishment student</i> <input type="checkbox"/> 11
<i>Secondary school student</i> <input type="checkbox"/> 01 <i>Wage or salary worker</i> <input type="checkbox"/> 03 <i>University student</i> <input type="checkbox"/> 05 <i>College of Education student</i> <input type="checkbox"/> 07 <i>Overseas (irrespective of occupation)</i> <input type="checkbox"/> 09 <i>Wānanga student</i> <input type="checkbox"/> 12	<i>Non-employed or beneficiary (excluding retired)</i> <input type="checkbox"/> 02 <i>Self-employed</i> <input type="checkbox"/> 04 <i>Polytechnic student</i> <input type="checkbox"/> 06 <i>House-person or retired</i> <input type="checkbox"/> 08 <i>Private Training Establishment student</i> <input type="checkbox"/> 11			

15	<p>¹Disability:</p> <p>Do you live with the effects of significant injury, long term illness, or disability? The information you supply is confidential.</p> <p><i>If yes, how would you describe your impairment, disability or long term medical condition:</i></p>	Yes <input type="checkbox"/>	No <input type="checkbox"/>
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C ACADEMIC INFORMATION

16	<p>Secondary School:</p>	<p>What was the name of the last secondary school you attended? State "overseas", if applicable.</p> <hr style="width: 80%; margin-left: 0;"/>	<i>Office Use</i>																		
		<p>What was your last year at secondary school? <input type="checkbox"/><input type="checkbox"/><input type="checkbox"/><input type="checkbox"/></p> <p>What is the highest level of achievement you hold from a secondary school? Your highest achievement may be a "traditional" award such as School Certificate, or you may have achieved a number of credits or a National Certificate at a certain level on the National Qualifications Framework. Your NZQA Record of Learning shows you how many credits you have. Tick only one box.</p> <table style="width: 100%; border: none;"> <tr> <td style="width: 80%; border: none;"><i>No formal secondary qualifications</i></td> <td style="width: 20%; border: none;"><input type="checkbox"/> 00</td> </tr> <tr> <td style="border: none;"><i>14 or more credits at any level</i></td> <td style="border: none;"><input type="checkbox"/> 11</td> </tr> <tr> <td style="border: none;"><i>NCEA Level 1 or School Certificate</i></td> <td style="border: none;"><input type="checkbox"/> 12</td> </tr> <tr> <td style="border: none;"><i>NCEA Level 2 or 6th Form Certificate</i></td> <td style="border: none;"><input type="checkbox"/> 13</td> </tr> <tr> <td style="border: none;"><i>University Entrance</i></td> <td style="border: none;"><input type="checkbox"/> 14</td> </tr> <tr> <td style="border: none;"><i>NCEA Level 3 or Bursary or Scholarship</i></td> <td style="border: none;"><input type="checkbox"/> 15</td> </tr> <tr> <td style="border: none;"><i>Overseas qualification (includes International Baccalaureate & Cambridge Exams)</i></td> <td style="border: none;"><input type="checkbox"/> 09</td> </tr> <tr> <td style="border: none;"><i>Other</i></td> <td style="border: none;"><input type="checkbox"/> 98</td> </tr> <tr> <td style="border: none;"><i>Not Known</i></td> <td style="border: none;"><input type="checkbox"/> 99</td> </tr> </table> <p>Please specify if "Overseas qualification" or "Other".</p> <hr style="width: 80%; margin-left: 0;"/>	<i>No formal secondary qualifications</i>	<input type="checkbox"/> 00	<i>14 or more credits at any level</i>	<input type="checkbox"/> 11	<i>NCEA Level 1 or School Certificate</i>	<input type="checkbox"/> 12	<i>NCEA Level 2 or 6th Form Certificate</i>	<input type="checkbox"/> 13	<i>University Entrance</i>	<input type="checkbox"/> 14	<i>NCEA Level 3 or Bursary or Scholarship</i>	<input type="checkbox"/> 15	<i>Overseas qualification (includes International Baccalaureate & Cambridge Exams)</i>	<input type="checkbox"/> 09	<i>Other</i>	<input type="checkbox"/> 98	<i>Not Known</i>	<input type="checkbox"/> 99	
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<i>Other</i>	<input type="checkbox"/> 98																				
<i>Not Known</i>	<input type="checkbox"/> 99																				

¹ The completion of this section is not compulsory

	English Level	What is your current level of English? Beginner Elementary Intermediate Advanced What is your IELTS/TOEFL Score?
17	Tertiary Study:	Will this be the first year you have ever enrolled in a University, Polytechnic, College of Education, Private Training Establishment, or Wānanga either in New Zealand or overseas since leaving school? Do not include enrolments in STAR, community or hobby classes. No <input type="checkbox"/> Yes <input type="checkbox"/> If you answered "No", please enter the name of the organisation you studied at and the year of your first enrolment: Name: Year: <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <hr/> What year do you expect to complete the academic requirements of your course/s in order to graduate with your qualification? Year: <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

D IRD NUMBER COLLECTION FOR STUDENT LOAN INTEREST WRITE-OFF

18 Do you currently have or will you have a Student Loan this year?

- **No** – please go to the next section

- **Yes** – please insert your IRD number (see notes for more information on interest write-off)

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Interest Free Student Loans and other Interest Write-offs

If you have a student loan, or anticipate applying for one this year, you may be entitled to have the interest on your loan written off for the period of study.

On 1 April 2006, legislation was introduced to make student loans interest free for borrowers living in New Zealand. For more information on how to become eligible for interest free student loans, visit www.ird.govt.nz/studentloans.

If you choose to provide your IRD number on the enrolment form this will be included with your enrolment details and will be reported to the Ministry of Education. The Ministry of Education will send your study information to Inland Revenue to check if you are eligible for an interest write-off and adjust your student loan account automatically.

Completing your IRD number is voluntary. If you choose not to provide your IRD number you should contact Inland Revenue directly if you think you may be eligible for an interest write-off.

Please Note: Completing your IRD number on this form is not an application for an interest write-off. If the information you provide is incorrect and can't be matched no write-off will occur. You will not be contacted directly in that event but you may contact Inland Revenue for more information.

E DOCUMENTATION																			
	<p>To qualify as a domestic student, and so be entitled to the Government tuition subsidy, you must be a citizen of New Zealand (including students from the Cook Islands, Tokelau, or Niue who have New Zealand citizenship) or a permanent resident of New Zealand or a citizen or permanent resident of Australia residing in New Zealand. You must provide evidence of citizenship or permanent residency and to do so you must produce one of the following:</p> <ul style="list-style-type: none"> ▪ Birth certificate with place of birth stated as New Zealand, Cook Islands, Tokelau, or Niue. ▪ New Zealand passport. ▪ A statement of Whakapapa, including date of birth, countersigned by a kaumatua. ▪ Certificate of citizenship or letter of confirmation. ▪ Overseas passport with residency stamp. <p>You can bring the original documentation to the enrolment desk, alternatively please provide a certified copy. This means a photocopy of your original document, signed as being a true and accurate copy by a Justice of the Peace (JP), Solicitor, Minister of the Church, General Practitioner or School Principal for example.</p> <p>International students must bring their passport with them when they enrol.</p> <p>Please note that your name, date of birth and residency as entered on this enrolment will be included in the National Student Index, and will be used in an Authorised Information Matching programme with the New Zealand Birth Register. For further information please see: http://www.nsi.govt.nz/ima.</p>																		
F BANK ACCOUNT																			
20	<p>Please provide details of your bank account for the deposit of items such as Travel Allowances.</p> <p> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/> </p> <p><i>Bank Branch Account Number Suffix</i></p> <p>Name of Bank:</p> <p>Name of Branch: Town/City:</p>																		
G CONTACT DETAILS																			
21	<table border="1"> <tr> <td rowspan="4">Home Address and contact details:</td> <td><i>Home Address:</i></td> <td><i>Postal Address: (if different from home address)</i></td> </tr> <tr> <td><i>Street Address:</i></td> <td><i>Street Address:</i></td> </tr> <tr> <td><i>Suburb:</i></td> <td><i>Suburb:</i></td> </tr> <tr> <td><i>Town/City:</i></td> <td><i>Town/City:</i></td> </tr> <tr> <td></td> <td><i>Post Code:</i></td> <td><i>Post Code:</i></td> </tr> <tr> <td></td> <td><i>Phone:</i></td> <td><i>Mobile:</i></td> </tr> <tr> <td></td> <td><i>Fax:</i></td> <td><i>Email:</i></td> </tr> </table>	Home Address and contact details:	<i>Home Address:</i>	<i>Postal Address: (if different from home address)</i>	<i>Street Address:</i>	<i>Street Address:</i>	<i>Suburb:</i>	<i>Suburb:</i>	<i>Town/City:</i>	<i>Town/City:</i>		<i>Post Code:</i>	<i>Post Code:</i>		<i>Phone:</i>	<i>Mobile:</i>		<i>Fax:</i>	<i>Email:</i>
Home Address and contact details:	<i>Home Address:</i>		<i>Postal Address: (if different from home address)</i>																
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	<i>Suburb:</i>		<i>Suburb:</i>																
	<i>Town/City:</i>	<i>Town/City:</i>																	
	<i>Post Code:</i>	<i>Post Code:</i>																	
	<i>Phone:</i>	<i>Mobile:</i>																	
	<i>Fax:</i>	<i>Email:</i>																	

21	Address While Studying:	<i>Address while Studying (if different from home address):</i>	
		<i>Street Address:</i>	
		<i>Suburb:</i>	
		<i>Town/City:</i>	
		<i>Post Code:</i>	
		<i>Phone:</i>	<i>Mobile:</i>
		<i>Fax:</i>	<i>Email:</i>
	Next of Kin:	<i>Name:</i>	<i>Phone:</i>
E HEALTH, WELFARE AND ACCOMMODATION			
	<p><i>It is a condition of enrolment that you have travel and medical insurance. You are fully liable for all medical costs incurred in New Zealand as a result of injury or illness. Please write your insurance company and attach relevant proof of insurance below.</i></p> <hr/>		
F CAREER AND COURSE INTENTIONS			
	Do you intend to pursue a career in the course you are currently applying for?		Yes/No
	If no what are your reasons for doing this course		
	Are you wanting to graduate and gain employment in New Zealand		Yes/No
	Will you be applying for a New Zealand Work Permit on course completion		Yes/No

DECLARATION

Privacy – The Organisation collects and stores information from this form to comply with the requirements of the Ministry of Education (student statistical returns), New Zealand Qualifications Authority (Record of Learning registration and Unit Standard outcomes), Tertiary Education Commission (funding returns), Industry Training Organisations (funding and academic outcomes), Ministry of Social Development (confirmation of enrolment and academic outcomes), Inland Revenue Department (student loan interest rebate), Department of Immigration (if you are not a New Zealand citizen or permanent resident) and Agencies who support particular students through scholarships and prizes, payment of fees or other awards (if you are a recipient of one of these awards). The information is also used to select students for qualifications, to manage internal administrative processes, and for internal reporting. Information about students may be supplied to, and sought from, other educational organisations for the purpose of verifying academic records.

In addition, when required by statute, the Institute releases information to Government agencies such as the New Zealand Police, Department of Justice, Ministry of Social Development, and the Accident Compensation Corporation (ACC).

In signing this enrolment form you authorise such disclosure on the understanding that the Organisation will observe the general conditions governing the release of information, as set out in the Privacy Act 1993 and the Post-compulsory Unique Identifier Code of Practice. You may see any information held about you and amend any errors in that information. To do so, contact the Enrolments Officer.

NB: The Privacy Act came into force on 1 July 1993 with the stated aim of protecting the privacy of natural persons. It requires the Organisation to collect, hold, handle, use and disclose personal information in accordance with the twelve information privacy principles in the Act. <http://www.privacy.org.nz/privacy-act>

Fees – In signing this enrolment form you undertake to pay all fees as they become due, and to meet any late fees and collection charges associated with debt recovery. If you withdraw from this course before commencement or up to seven days after the course has commenced a full refund of course fees less an administration fee of \$500.00 will be payable. If no fees have been paid, the administration fee of \$500.00, will still apply. After the seven day period has elapsed, no refund will be provided and all course fees must still be paid. Any outstanding debts or monies due, will be lodged with Veda Advantage (formally know as Baycorp Advantage) as a Payment Default, until the debt has been repaid. At the time that the debt has been repaid the status of the debt will be changed to read 'Settled', on your credit report.

I _____ understand that if I default in my payment obligations to The Professional Bar School, information about that default may be given to Baycorp Advantage / Veda Advantage and Baycorp Advantage / Veda Advantage may give information about my default to other Baycorp Advantage / Veda Advantage customers.

Rules – In signing this enrolment form you undertake to comply with the published rules and policies of the Organisation with regard to attendance, academic progress, standard of dress, health and safety, and behaviour.

Declaration – I declare that to the best of my knowledge all the information supplied on, and with, this enrolment form is true and complete, I agree to abide by the conditions described above, and I consent to the disclosure of personal information as described above.

_____/_____/_____
Signature Date

➤ **Please make sure that you sign your enrolment form above** ◀

Office Use Only		Version 4.1 Designed by Meta Office with Take2 Users in Mind
Documentation	Approved	Entered
_____ _____/_____/_____	_____ _____/_____/_____	_____ _____/_____/_____

The Professional Bar and Restaurant School



SKILLS CAPABILITY ASSESSMENT

The purpose of this assessment is to recognise your current skills in:

- Reading to gather information
- Recognising words and finding errors
- Spelling
- Comprehension

READING FOR INFORMATION

Instructions: Use the following advertisements to answer the questions.

CATERING & BAR STAFF

We require 5 people to help with a Function on Saturday 20th July.
Hours are 4pm to 12 midnight.
Experience essential
Please phone Janet on 266-4532

PROCESS WORKER

We require in our Manukau processing plant three workers.
Must have:

- Food handling certificate
- Good personal presentation

Send your CV to
Process Worker
PO Box 546

Lunch Bar Assistant

Manukau City
Hours 6.00am to 3.00pm
Cash handling experience
Customer service
Will train
Ring Willy on 266-6798
before 7.00am

1. There are _____ vacancies for the catering and bar staff job.
2. Cash handling experience skills are needed for the _____ job.
3. One company wants someone with 'customer service' skills. What does this mean to you? _____

4. What qualifications do you need to apply for the process workers job? _____
