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| **Name of Applicant to be vetted:** |
|       |
|  |
| **Name of Approved Agency submitting vetting request:** |
| Hospice Eastern Bay of Plenty |

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| Section 1: | **Approved Agency to complete** |
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| **APPLICANT’S ROLE – PURPOSE OF VET** |
|  |
| [ ]  Employee [ ]  Contractor/consultant [x]  Volunteer [ ]  Licence/Registration [ ]  Other: (please specify here) |
| Is this a renewal check? [ ]  Yes [x]  No |
|  |
| Description of role / licence / registration (e.g. caregiver; cleaner; taxi driver; teacher; etc): |
|       |
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| Role location (e.g. home; office; school; etc): |
|       |
|  |
| Contact with vulnerable groups: |
|  |  |  |
| [ ]  Contact with children/youth | Type of contact: | [ ]  Supervised [ ]  Unsupervised |
|  |  |  |
| [ ]  Contact with vulnerable adults (aged, disabled) | Level of contact: | [ ]  High [ ]  Occasional |
|  |  |  |
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| Application of clean slate: |

To enable NZ Police to assess whether an exception applies to the general effect of the clean slate scheme on an eligible individual under the Criminal Records (Clean Slate) Act 2004, I declare my belief as follows:

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| The role does not fit the criteria in section 19(3) of the Criminal Records (Clean Slate) Act* e.g. teacher, doctor/nurse, rest home carer, school janitor

[Section 16] – **Criminal convictions will not be released** **IF the applicant is eligible for clean slate.** | **[x]** **Clean Slate** |
|  |  |
| **OR** |
|  |  |
| The role fits the criteria of one or more of the exceptions in section 19(3) of the Criminal Records (Clean Slate) Act* + e.g. it is a role predominantly involving the care and protection of, but not predominantly involving the delivery of education to, a child or young person (e.g. caregiver, nanny/crèche worker, foster/homestay parent, applicant for adoption) [section 19(3)(e)].

[Section 19(2)] – **All criminal convictions will be released****EVEN IF the applicant is eligible for clean slate.** | **[ ]** **Exception** |
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For information on the clean slate regime, see <http://www.justice.govt.nz/services/criminal-records/about-the-criminal-records-clean-slate-act-2004>.

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| Section 1 continued: | **Approved Agency to complete** |

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| **EVIDENCE OF IDENTITY (ID)** |

* for further information, see<http://www.dia.govt.nz/Resource-material-Evidence-of-Identity-Standard-Index>

I confirm that the identity of the applicant has been checked by [A] or [B] as follows:

|  |  |  |
| --- | --- | --- |
| **[A]** | I haveOR | **[ ]**  |
| **[B]** | A Trusted Referee\* has | **[ ]**  |
|  | sighted the ID documents below, and verified the photo against the applicant in person (mark box) |  |
|  | [ ]  Primary ID document (e.g. passport, original birth certificate, etc)*and*[ ]  Another form of ID (e.g. driver licence, firearms licence, 18+ card, Community Services Card, etc)*and*[ ]  One of the above must be photographic – confirm comparison made*and, if applicable*[ ]  Evidence of name change where names differ (e.g. marriage/civil union certificate, statutory declaration, etc) |  |
|  |  |  |
|  | *[\*a trusted referee must be over 16, have known the applicant for at least 12 months, and not be related, or a partner/spouse, or a co‑resident of applicant, and be either registered with the Approved Agency or a person of standing in the community (e.g. registered professional, religious or community leader). The trusted referee must sign a copy of the photo ID and provide his or her name and contact details.]* |  |
|  | *Optional additional check by me (if appropriate)* |  |
|  | [ ]  A search of our records to verify uniqueness (especially for professional bodies)  |  |
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| **CHECKLIST** |

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| In making this request, I confirm that: |
|  | [ ]  I have complied and will comply with the Approved Agency Agreement (or existing Memorandum of Understanding) between NZ Police and the Approved Agency I represent;[ ]  I am satisfied as to the correctness of the Applicant’s identity; and[ ]  I have obtained the signed consent of the Applicant, as set out in section 2 of this form, to submit this vetting request. |

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| Approved Agency Authorised Representative: |
| Name: |       | Signature: |  | Date: |       |  |
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| **Name of Approved Agency submitting vetting request:** |
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| Section 2: | **Applicant to complete and return to Approved Agency** **(the Approved Agency will submit the vetting request to NZ Police and receive the vetting result)**  |
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| **PERSONAL INFORMATION** |
| Details *(note: the name you are most commonly known by is your primary name)*  |
|  |  |  |  |  |  |  |  |
| Family name:(Primary) |       |  | First name(s):(Primary) |       |  |       |  |
|  |  |  |  |  |  |  |  |
| Gender: | (M) (F) (Other) [ ]  [ ]  [ ]  |  | Date of birth:(dd/mm/yyyy) |       |  |
|  |  |  |  |  |  |  |
| Place of birth:(town/city/state) |       |  | Place of birth:(country) |       |  |
|  |  |  |
| NZ Driver Licence number:(for ID verification by NZ Police – optional) |       |  |
|  |  |  |  |  |  |  |
| Passport number:(if held) |       |  | Country of issue: |       |  |
| Only for 'Additional Authorisation' - see page 4 |  |  |  |  |  |  |

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| If applicable, please include other names and mark them A, M, or P as appropriate: **(A)** alias or alternate name(s) **(M)** married name if not primary name**(P)** previous/maiden/name changed by deed poll or statutory declaration |
|  |  |  |  |  |  |  |  |
| Family name:(A) (M) (P) [ ]  [ ]  [ ]  |       |  | First name(s):(A) (M) (P) [ ]  [ ]  [ ]  |       |  |       |  |
|  |  |  |  |  |  |  |  |
| Family name:(A) (M) (P) [ ]  [ ]  [ ]  |       |  | First name(s):(A) (M) (P) [ ]  [ ]  [ ]  |       |  |       |  |
|  |  |  |  |  |  |  |  |
| Family name:(A) (M) (P) [ ]  [ ]  [ ]  |       |  | First name(s):(A) (M) (P) [ ]  [ ]  [ ]  |       |  |       |  |
|  |  |  |  |  |  |  |  |
| Family name:(A) (M) (P) [ ]  [ ]  [ ]  |       |  | First name(s):(A) (M) (P) [ ]  [ ]  [ ]  |       |  |       |  |
|  |  |  |  |  |  |  |  |
| Permanent New Zealand Residential Address |
|  |  |  |  |  |  |  |  |
| Number/Street: |       |  |
|  |  |  |  |  |
| Suburb: |       |  | Post Code: |       |  |
|  |  |  |  |  |  |  |  |
| City/Town/Rural District: |       |  | Period of Residence: |       |  |
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| Section 2: continued | **Applicant to complete and return to Approved Agency** **(the Approved Agency will submit the vetting request to NZ Police and receive the vetting result)**  |

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| **CONSENT TO DISCLOSURE (for a New Zealand Police Vet Check)** |
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* for further information, see<http://www.police.govt.nz/advice/businesses-and-organisations/vetting>

**I acknowledge and understand** as follows:

1. The information about me that NZ Police may consider relevant to my application and release in vetting comprises any conviction history and, for certain agencies, infringement/demerit reports; and it may include other information such as active charges and warrants to arrest, any information received or obtained by NZ Police, and any interaction I have had with NZ Police in any context (including family violence), even where I have not been charged, or charges are withdrawn, or I have been acquitted (not guilty) of a charge, or I have been discharged without conviction.
2. Any conviction history will be released in accordance with the Criminal Records (Clean Slate) Act 2004; this means that, if I am ‘eligible’ for clean slate (e.g. no convictions for 7 years, never been to prison, no convictions for specified sexual offending, etc – see section 7 of the Act):
3. my criminal record of convictions will not be disclosed; but
4. if the role for which I have applied is an exception to the clean slate scheme (e.g. predominantly involving care and protection of a child or young person), my criminal record of convictions will be disclosed.
5. When releasing information to non-government Approved Agencies, Police may release the fact, without details, that suppressed information exists in relation to any conviction and, where NZ Police considers it relevant and justified, in relation to any current or past charge however it was resolved (e.g. withdrawn, discharged, acquitted).
6. Where NZ Police holds relevant information that it is unwilling to disclose to the Approved Agency for privacy, confidentiality or law enforcement reasons, NZ Police may recommend against unsupervised access to children or vulnerable persons (this is known as a ‘red stamp’).
7. The personal information I provide in this form is being collected for vetting purposes, and may also be used for the purpose of updating NZ Police records.
8. I may withdraw this consent, prior to Police’s disclosure of the vetting result, by notifying the Approved Agency who will immediately notify NZ Police to cease the vetting process.
9. I am entitled to access the vetting result released to the Approved Agency and seek correction of Police information about me in accordance with the Privacy Act 1993. By making a request to the 'Approved Agency' within 20 working days of submitting this 'Request and Consent' form.
10. No later than three months after the conclusion of the vetting process, the Approved Agency will securely dispose of this consent form and copies of identification documents, as well as the vetting result released by NZ Police, in accordance with the Privacy Act 1993 or, if applicable, the Public Records Act 2005 or any other enactment.
11. The information I have provided in this form relates to me and is correct.

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| **Authorisation**  |
| **I authorise** NZ Police to disclose any personal information it considers relevant to my application (as described above) to the Approved Agency making this request for the purpose of assessing my suitability. |
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| **Additional Authorisation [cross out or strike through this additional authorisation below if not applicable]**Where the Approved Agency requesting a vet is a NZ Police business group (e.g. vetting for contractors to NZ Police; workers at major security events) |
| **I also authorise**: |
|  | * NZ Police to disclose the information on this form to, and access information from, other government agencies;

*and** NZ Police to disclose to my employer or other relevant agency its assessment regarding my suitability (only to the extent that I am approved or not approved as suitable, without reasons).
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| Signature of applicant |  | Date: |     |  |
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