

Section 1: NZ Police (Supervisor/Hiring Manager to complete)

Name of Applicant to be vetted: **First Name, Middle names, Surname**

Name of Police District: **District Name - Patrol Name**

APPLICANT'S ROLE – PURPOSE OF VET

☐ Employee ☐ Contractor ☒ Volunteer

Description of Applicant's role (e.g. Vetting Officer, HR Advisor etc):

CPNZ Volunteer Patroller

Application of the Criminal Records (Clean Slate) Act 2004:

The NZ Police Vetting Service must comply with the Criminal Records (Clean Slate) Act 2004.

Section 16 (Clean Slate): Conviction history will not be released if applicant is eligible for clean slate.

The role does not fit the criteria in section 19(3) of the Criminal Records (Clean Slate) Act, e.g. Police employee.

EVIDENCE OF IDENTITY (ID) - I confirm that the identity of the applicant has been checked as follows:

I have (or my delegate has*) sighted the ID documents below (one must be photographic), and verified the photo against the applicant in person (mark box)

☐ A **Primary** ID document (Passport, original Birth Certificate, Firearms Licence, NZ Citizenship Certificate or NZ Refugee Travel Document)

AND

☐ A **Secondary** form of ID (e.g. NZ Drivers Licence, 18+ card, Community Services Card, etc;

AND (if applicable)

☐ Evidence of name change where names differ (e.g. marriage/civil union certificate, statutory declaration, etc)

* A delegate is a person authorised by the Police member responsible for submission of vetting requests to sight and record evidence of identification. e.g. a watchhouse assistant or recruitment agency acting on behalf of Police.

CHECKLIST - In making this request, I confirm that:

- ☐ I have complied and will comply with the Approved Agency Agreement (<http://www.police.govt.nz/about-us/publication/approved-agency-agreement-aaa>) 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 Applicant's authorisation to submit this vetting request, as set out in section 2 of this form.

NZ Police Authorised Representative:

Date:

Signature:

OR

Signed in electronic form:
[mark box]

☐

Name of Approved Agency submitting vetting request:

Community Patrols of New Zealand - Agency Number N80345

Section 2: Applicant to complete and return to Approved Agency

**Denotes a mandatory field*

Personal Information

Details (note: the name you are most commonly known by is your primary name)

*Family name (Primary):

Given name(s):

*Gender:

(M) (F) (Other)
☐ ☐ ☐

*Date of birth:
(dd/mm/yyyy)

Place of birth:
(Town/City/State)

*Country of birth

NZ Driver Licence number:

Previous names: If applicable, please include other alias or alternate names; married name if not your primary name; previous/maiden/name changed by deed poll or statutory declaration.

Family name

First name

Middle names

Permanent Residential Address

*Number/Street:

Suburb:

Post Code:

*City/Town/
Rural District:

**Section 2:
continued**

Applicant to complete and return to NZ Police

CONSENT TO DISCLOSURE (for a New Zealand Police Vet)

I acknowledge and understand as follows:

1. NZ Police will access any information held by Police and information from any other source for purpose of assessing my suitability for employment or engagement by NZ Police.
2. 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 any 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.
3. Where relevant information is subject to statutory or Court-ordered name suppression or prohibitions on disclosure, or other constraints on disclosure such as expectations of confidentiality or the protection of active criminal investigations or the safety of individuals, NZ Police may issue an alternative vetting result stating the existence of relevant non-disclosable information, without details.
4. Where new information is obtained by NZ Police after the completion of my Police vet, NZ Police may disclose this information to the Approved Agency, and where appropriate to the Vulnerable Children Act Exemptions Administrator, if the information is considered relevant to the purpose of the Police vet.
5. 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.
6. I may withdraw this consent, prior to Police's disclosure of the vetting result, by notifying the Police Human Resources Manager (agent of the 'Approved Agency') who will immediately notify the Police Vetting Service to cease the vetting process.
7. The information I have provided in this form relates to me and is correct.

Applicant's Authorisation:

☐

I have read and understood the information above

☐

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.

Applicants Name:

Date:

Signature:

OR

Signed in electronic
form: [mark box]

☐