# Part A – Applicant to complete for any appointment

### 1. Applicant and appointment details

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| **Surname:** |
| **First Names** *(in full)* |
| **Job title:** |
| **Email:** |
| **Organisation:** |
| **Reason for application: 🞏 New appointment 🞏 Re-appointment 🞏 Addition to existing appointment** |
| **Previous or existing statutory appointments by the Ministry for Primary Industries (MPI) or predecessors** *(appointment/s, approximately when)***:** |

### 2. I apply for appointment as: (*tick applicable appointments)*

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Tick** | **Act** | **Section of Act** | **Name of statutory appointment** | **Additional Part** |
|  | Animal Products Act 1999 | 79(2) | official assessor | **D** |
|  | Animal Welfare Act 1999 | 123A | auditor |  |
|  | Animal Welfare Act 1999 | 125 | auxiliary officer | **E** |
|  | Animal Welfare Act 1999 | 124(2) | inspector | **E** |
|  | Animal Welfare Act 1999 | 109 | accredited reviewer | **F** |
|  | Biosecurity Act 1993 | 103(1) | authorised person | **G** |
|  | Biosecurity Act 1993 | 103(7) | accredited person | **G** |
|  | Biosecurity Act 1993 | 105B | auditor |  |
|  | Fisheries Act 1996 | 197 | honorary fishery officer | **H** |
|  | Fisheries Act 1996 | 222 | examiner |  |
|  | Fisheries Act 1996 | 223 | observer |  |
|  | Food Act 2014 | 276 | food safety officer | **I** |
|  | Forests Act 1949 | 11(2) | forestry officer | **K** |
|  | Hazardous Substances and New Organisms Act 1996 | 97A | enforcement officer |  |
|  | National Animal Identification and Tracing Act 2012 | 52 | NAIT authorised person |  |

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| **Email all pages (completed and signed as required) to:** [appointments@mpi.govt.nz](mailto:appointments@mpi.govt.nz).  Or post to: Statutory Appointments Processing Centre  Regulatory Systems & Support  Ministry for Primary Industries (MPI)  PO Box 2526  WELLINGTON 6140  **Mark as “Personal: In Confidence”** |

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| **3. Applicant’s consents to disclosure of information** I authorise my organisation and the Ministry for Primary Industries (MPI) to make such enquiries as they consider necessary to enable them to consider my suitability (covering fitness, propriety and competence) for the statutory appointment applied for above.  * I have attached, completed and signed, the NZ Police Authorisation to Disclose Information (convictions check),   I authorise my organisation to attach a copy of the result from a convictions check completed within a maximum of 6 months prior to this application.  *(Delete the statement that is not relevant)*   * I have attached a completed and signed Consent to Disclosure of Information by Previous Employers. * I authorise my organisation and MPI to disclose to each other on an ongoing basis any matters that may be relevant to my suitability or continued suitability for the statutory appointment/s applied for above, including any matters that may arise in the future. |
| **4. Applicant’s declarations**   * To the best of my knowledge, I am not aware of anything (covering fitness, propriety and competence) that could affect my suitability for the statutory appointment applied for.   Attached is additional information that I am aware of that could be perceived as affecting my suitability.  *(Delete the statement that is not appropriate)*   * I accept that if I am appointed I have a continuing obligation to promptly disclose to my organisation and MPI any matters that may arise in the future which may be relevant to my continued suitability to hold appointment. This includes but is not limited to Police and disciplinary investigations and conflicts of interest relating to, or that may be perceived as relating to, my role as a statutory appointee. * To the best of my knowledge, the information I have supplied is true, correct and complete. I understand that if any information that I have supplied is found to be false, incorrect or incomplete, this may be grounds for suspension or revocation of my appointment. * I have attached evidence of my competency for this statutory appointment. * I have also completed Part \_\_\_\_\_. *(Delete if not applicable.)* |
| Signed: Date:  Print name: |

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| **5. Suitability for appointment**  MPI has an obligation to ensure that only suitable people hold statutory appointments. There are two general aspects to suitability:   * Firstly, an applicant must have the appropriate technical competence (qualifications, skills and experience) to perform the role. * Secondly, the appointee must be a fit and proper person, which takes into account such matters as their integrity, character and reputation. Some criminal convictions or charges may be relevant to the assessment of whether a person is fit and proper to hold the particular statutory appointment applied for. Note that these are general considerations. Particular criteria may apply depending on the type of statutory appointment applied for. Further, whether these criteria are satisfied will depend on the context and purpose of the specific legislation and role.   MPI has the power to revoke a statutory appointment if it becomes aware of information that is relevant to an appointment but was not disclosed in the application or may have arisen since the appointment was made.  After the Police / convictions check has been assessed and a decision made about whether to give the appointee a statutory appointment, the Police / convictions check will be destroyed and a note held on the appointees record that the check was received and taken into account in making the appointment decision. |
| **6. Collection of Personal Information on Individuals**  In accordance with Principle 3 of the Privacy Act 2020, we advise that:   1. This information is being collected to enable consideration of an application for statutory appointment under legislation administered by the Ministry for Primary Industries, or under legislation that the Ministry for Primary Industries has delegated authority to appoint persons. 2. The recipient of this information, which is also the agency that will collect and hold the information, is the Ministry for Primary Industries, PO Box 2526, Wellington 6140. 3. The collection of this information is authorised by the relevant statutory provision. 4. The supply of this information is voluntary. 5. If all or any part of the requested information is not provided, it is likely that the application form will be returned to the applicant. A continued failure to provide the requested information may result in the application for statutory appointment being declined. 6. Under Principles 6 and 7 of the Privacy Act 2020, you have the right to access, and to request correction of, any personal information which has been provided. |
| **7. Collection of Official Information**  All information provided to the Ministry for Primary Industries is official information and subject to the Official Information Act 1982. If a request is made under that Act for information you have provided in this application, the Ministry for Primary Industries will consider any such request, taking into account its obligations under the Official Information Act 1982 and any other applicable legislation such as the Privacy Act 2020. |

### Consent to Disclosure of Information by Previous Employers1

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| **Surname:** |
| **First Names** *(in full)* |

My previous employers over the last 5-year period have been:

|  |  |  |
| --- | --- | --- |
| **Employer** | **Start date** | **Finish date** |
|  |  |  |
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I consent to the employers listed above disclosing to the Ministry for Primary Industries the following personal information:

1. the date I commenced employment with the employer;
2. the date my employment with the employer finished;
3. all other information that may be relevant to whether I am a fit and proper person to be appointed to the statutory applications ticked below:

In particular, this includes information regarding:

* 1. my technical competence, skills, and experience; and
  2. my character, integrity and reputation.

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| **Tick** | **Statutory appointment** | **Act** |
|  | official assessor | Animal Products Act 1999 |
|  | auxiliary officer | Animal Welfare Act 1999 |
|  | inspector | Animal Welfare Act 1999 |
|  | accredited reviewer | Animal Welfare Act 1999 |
|  | authorised person | Biosecurity Act 1993 |
|  | accredited person | Biosecurity Act 1993 |
|  | auditor | Biosecurity Act 1993 |
|  | honorary fishery officer | Fisheries Act 1996 |
|  | examiner | Fisheries Act 1996 |
|  | observer | Fisheries Act 1996 |
|  | food safety officer | Food Act 2014 |
|  | forestry officer | Forests Act 1949 |
|  | enforcement officer | Hazardous Substances and New Organisms Act 1996 |
|  | NAIT authorised person | National Animal Identification and Tracing Act 2012 |

Signed .............................................................................................................................................. Date …………….……

1 If self-employed, provide clients, customers or other relevant people as referees

**Part B – Applicant’s manager2 to complete for any appointment**

### 8. Organisation contacts

|  |  |
| --- | --- |
| **Organisation’s legal name:** | |
| **Applicant’s name:** | **Manager’s name:** |
| **Manager’s phone:** | **Manager’s email:** |
| **Manager’s courier address for appointment documents:** | |

### 9. Application information

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| **Appointment start date:** *(see Notes):* |
| **Applicant’s unique identification number:** *(if applicable)* |
| **Appointment expiry after3**: **🞏 12 months 🞏 Maximum (3 years) 🞏 Other**: \_\_\_\_\_\_\_\_\_ |
| **Are there any limitations or conditions to be placed on this appointment?**  (*e.g. for a specific purpose, geographic area or only some clauses of the appointment*)  **🞏 No 🞏 Yes** *(state reason below or attach a separate page)* |

### 10. Manager’s declarations

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| * + I confirm that the applicant performs the functions specified in Part \_\_\_\_.   + I am satisfied that the applicant is competent (has appropriate qualifications, skills and practical experience) for the statutory appointment ticked in Part A and the specific role listed in Part \_\_\_\_. I undertake to ensure that the competencies are maintained.   + I am satisfied that the applicant is a fit and proper person to be appointed / re-appointed to the statutory appointment ticked in Part A and the specific role listed in Part \_\_\_\_.   + Evidence of the applicant’s suitability is attached to this application including:   🞏 A recent convictions check or a completed authorisation to the New Zealand Police to disclose information  🞏 A completed to disclosure of information by previous employers  🞏 Academic qualifications, industry qualifications, skills and experience  🞏 Training specifically for this statutory appointment.   * + I am not aware of any matter that might adversely affect the suitability of the applicant for the statutory appointment ticked in Part A.   Additional information is attached about some matters that may be perceived as adversely affecting the suitability of the applicant for the statutory appointment.  *(Delete the statement that is not appropriate)*   * + I confirm that the photo is an accurate likeness of the applicant.   + I will notify the Ministry for Primary Industries without delay if I become aware of any matters that may be relevant to the suitability (covering fitness, propriety and competence) of the applicant to continue to hold this statutory appointment.   + If the applicant leaves the role for which this statutory appointment is required, I will make all reasonable efforts to retrieve the statutory appointment card and return it to MPI.   + My organisation holds all copies of the documentation related to this application. This is available for verification/audit if required.   + I recommend the applicant for appointment to the statutory appointment ticked in Part A. |
| **Signed: Date:**  **Print name:**  **Designation/Position:** |

1. This is the manager in the organisation you are contracted to, to undertake the appointment work
2. If additional statutory appointments are added to an existing appointment, the earliest expiry date will apply to them all.

### 11. Checklist for completed application

🞏 Part A, completed and signed by applicant (including Consent to Disclosure of Information by Previous Employers)

🞏 Part B, completed and signed by manager

🞏 JPG photo

🞏 Recent Convictions check, or 🞏 Authorisation for Police Convictions check (*Consent form pages 8-10*)

*(tick the applicable statement)*

🞏 Academic, industry and appointment qualifications, skills and experience *(if applicable)*

🞏 Additional Part \_\_\_\_\_ for the specific role under this statutory appointment *(if applicable)*

🞏 Additional information about the applicant’s suitability (*if applicable*)

### 12. Notes

* A whole application comprises Parts A and B *plus* additional parts if applicable *plus* supporting information *plus* a jpg photo. Allow 20 working days after submitting the whole application for processing. This allows sufficient time for Police Vetting to be completed and for MPI to assess the application.
* The applicant’s manager is responsible for ensuring the information in an application is correct and complete.
* For re-appointments the manager is responsible to make all reasonable efforts to retrieve the old card when the new card is issued and return the old card to MPI.
* The manager is also responsible for requesting replacement statutory appointment cards if one is lost or destroyed.
* If an emergency statutory appointment is required, the manager should first discuss the proposed appointment and agree any special conditions with the MPI director for that area. A paper appointment document will be produced. The appointee will have to carry it and some other form of ID when exercising powers.
* Emergency appointments still require evidence that the appointee has met the appointment criteria. This may be managed by imposing conditions on the appointment.

### 13. Photo requirements

* A head and shoulders colour digital photo.
* The employer must verify that the photos represent an accurate likeness. This is done in the Manager’s declarations part of this application form.
* A full-front view of the face, head and shoulders, looking straight at the camera with eyes open and clearly visible, and head straight
* In all cases facial features from bottom of chin to top of forehead and both edges of face must be clearly shown. Without hat, head band or head covering (unless worn for religious or medical reasons). No hair across face or eyes.
* Without sunglasses. Tinted prescription glasses may be worn as long as the eyes are still visible. No light reflection on glasses. Thick/heavy rimmed frames must be removed.
* A true image and not altered in any way.
* Clear, sharp and in focus with minimum reflective light on face. No red-eye.
* With a plain, light-coloured background (not white or dark) and no background shadow. (Step forward until the background shadow disappears.)
* Of high quality colour showing natural skin tones (black and white photos are not acceptable).

**Part C – MPI to complete**

*This page is completed when a technical assessment and/or a peer review is required.*

### 14. Received (as applicable for statutory appointment/s ticked on page 1)

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| --- | --- |
| 🞏 Part A, completed by applicant | 🞏 Consent to Disclosure of by Previous Employers |
| 🞏 Part B, completed by manager | 🞏 Police convictions check or Authorisation for one |
| 🞏 JPG photo | 🞏 Academic qualifications |
| 🞏 Industry training, qualifications and experience | 🞏 Training specifically for this statutory appointment |
| 🞏 Additional Part \_\_\_\_ | 🞏 Additional information about suitability |
| Date all information required received: \_\_\_\_ / \_\_\_\_ / \_\_\_\_ | |

### 15. Assessment by \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| **Fit and proper person** | **Checked** | **Comment** |
| Criminal convictions check |  |  |
| Previous employers |  |  |
| Other information |  |  |
| **Competence** |  |  |
| Academic qualifications |  |  |
| Industry qualifications |  |  |
| Skills and experience |  |  |
| Training for statutory appointment |  |  |
| **Other** |  |  |

**16. Recommendation** *(tick the appropriate statement and insert comments as required)*

|  |  |
| --- | --- |
| 🞏 Appoint without limitations and/or conditions | |
| 🞏 Appoint with the following limitation(s) and/or condition(s): | |
| 🞏 **DO NOT** appoint for the following reason(s): | |
| **Signed: Date:**  **Print Name: Designation:** |

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| **Section 1: Approved Agency to complete**  For more information please see the [Guide to Completing the Consent Form](http://www.police.govt.nz/sites/default/files/publications/user-guide-to-pvs-vetting-request-consent-form.pdf) <http://www.police.govt.nz/advice/businesses-and-organisations/vetting/forms-and-guides> | | | | | | | | | | |
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| **Name of Approved Agency submitting vetting request:** | | | | | | | | | | |
|  | | | | | | | | | | |
| **Name of Applicant to be vetted:** | | | | | | | | | | |
|  | | | | | | | | | | |
| **Description of Applicant’s role:** | | | | | | | | | | |
|  | | | | | | | | | | |
| **Applicant’s purpose** | | | | | | | | | | |
| Employee | | | Contractor/Consultant | Volunteer | | | Prosecution | | | |
| Vocational Training | | | License/Registration | Visa/Work Permit | | | Other | | | |
| **What group(s) will the applicant have contact with in their role for your agency?** | | | | | | | | | | |
| Children/Youth | | | Elderly | Other Vulnerable Adults | | | Other | | | |
| **What is the applicant’s *primary* role for your agency?** | | | | | | | | | | |
| Caregiving (Children) | | | Caregiving (Vulnerable adults) | Healthcare | | | Education | | | |
| Other | | |  |  | | |  | | | |
| **Is this request mandatory under the Vulnerable Children Act 2014 (VCA)?** | | | | | | | | | | |
| Yes (VCA Core Worker) | | | | Yes (VCA Non-Core Worker) | | | | | | |
| No (mandatory under other legislation/optional/standard Police Vet) | | | | | | | | | | |
| **If this is a mandatory Vulnerable Children Act request, please specify the check reason below:** | | | | | | | | | | |
| New Children’s Worker | | | | Existing Children’s Worker | | | | | | |
| VCA Renewal | | | |  | | | | | | |
| **Evidence of Identity** (to be completed by agency representative/delegate or identity referee - see [guide](http://www.police.govt.nz/sites/default/files/publications/user-guide-to-pvs-vetting-request-consent-form.pdf) for details) | | | | | | | | | | |
|  | | A primary ID has been sighted (Mandatory – see the [guide](http://www.police.govt.nz/sites/default/files/publications/user-guide-to-pvs-vetting-request-consent-form.pdf) for further details) | | | | | | | | |
|  | | A secondary ID has been sighted (Mandatory – see the [guide](http://www.police.govt.nz/sites/default/files/publications/user-guide-to-pvs-vetting-request-consent-form.pdf) for further details) | | | | | | | | |
|  | | One form of ID is photographic (Mandatory – see the [guide](http://www.police.govt.nz/sites/default/files/publications/user-guide-to-pvs-vetting-request-consent-form.pdf) for further details) | | | | | | | | |
|  | | Evidence of name change has been sighted (if applicable) | | | | | | | | |
| *OR: If your organisation is able to accept a verified RealMe identity then:* | | | | | | | | | | |
|  | | An assertion of a RealMe identity has been received (see [guide](http://www.police.govt.nz/sites/default/files/publications/user-guide-to-pvs-vetting-request-consent-form.pdf) for further information). | | | | | | | | |
| 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) | | | | | | | | | | |
| ✓ I am satisfied with the correctness of the applicant’s identity | | | | | | | | | | |
| ✓ I have obtained the Applicant’s authorisation to submit this vetting request as set out in section 3 of this form | | | | | | | | | | |
| Approved Agency Authorised Representative: | | | | | | | | | | |
| Name: | | | |  | | | Date: |  | |  |
|  | | | |  | | |  |  | |  |
| Signature: | | | |  | | | Electronic Signature |  | |  |
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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** | | | | |
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| *\*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 License number: |  | | |  |
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**Previous names**: If applicable, please include other aliases or alternate names; married name if not your primary name; previous/maiden/name changed by deed poll or statutory declaration.

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|  | Family name |  | First name |  | Middle names |  |
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| **Permanent Residential Address** | | | | |
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| \*Number/Street: |  | | |  |
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| Suburb: |  | Post Code: |  |  |
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| \*City/Town/  Rural District: |  | | |  |
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| **Section 3: Applicant to complete and return to Approved Agency** | |

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| **Consent to release information** |
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1. The New Zealand Police may release **any** information they hold relevant to the purpose of this vetting request. This includes:

* Conviction histories and infringement/demerit reports
* Active charges and warrants to arrest
* Charges that did not result in a conviction including those that were acquitted, discharged without conviction, diverted or withdrawn
* **Any** interaction I have had with New Zealand Police considered relevant to the role being vetted, including investigations that did not result in prosecution
* Information regarding family violence where I was the victim, offender or witness to an incident or offence, primarily in cases where the role being vetted takes place in a home environment where exposure to physical or verbal violence could place vulnerable persons at emotional or physical risk.
* Information subject to name suppression where that information is necessary to the purpose of the vet

1. If I am eligible under the Criminal Records (Clean Slate) Act 2004, my conviction history will not be released **unless**:
   1. Section 19(3) of the Clean Slate Act applies to this request (exceptions to the clean slate regime)

* Section 31(3) of the Vulnerable Children Act 2014 applies to this request (safety checks of core children’s workers).
* The vetting request is made by an individual for the purpose of an overseas Visa/Work Permit as a Privacy Act request authorising the vetting result to be provided directly to the relevant embassy, high commission or consulate.

Please see the [guide](http://www.police.govt.nz/sites/default/files/publications/user-guide-to-pvs-vetting-request-consent-form.pdf) for more information regarding the Clean Slate legislation.

1. The Police Vetting Service may disclose new relevant information to the Approved Agency after the completion of the Police Vet in the following circumstances:

* The disclosure of the newly-obtained information is considered to be justified under the Privacy Act 1993 (if it had existed or been available at the time of the Police vet, it would have been disclosed); and
* The Police Vetting Service has ascertained that the purpose of the Police vet (e.g. employment role) still exists.

The Vetting Service will endeavour to notify you prior to the disclosure.

1. Information provided in this consent form may be used to update New Zealand Police records.
2. I am entitled to a copy of the vetting result released to the Approved Agency (to be provided by the agency) and can seek a correction by contacting the Vetting Service.
3. The Approved Agency will securely dispose of this consent form, copies of identification documents and the vetting result within 12 months of receiving the result unless a longer retention period is required by legislation.
4. I may withdraw this consent, prior to Police’s disclosure of the vetting result, by notifying the Approved Agency.

For further information, please see the [Guide to Completing the Consent Form](http://www.police.govt.nz/sites/default/files/publications/user-guide-to-pvs-vetting-request-consent-form.pdf).

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| **Applicant’s Authorisation:**  ✓ I confirm that the information I have provided in this form relates to me and is correct.  ✓ I have read and understood the information above.  ✓ I authorise New Zealand 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 at any time. | | | | |
| Name: |  | Date: |  |  |
| Signature: |  | Electronic Signature |  |  |
|  | | | | |