**Statutory appointment application form**

**Part D: Animal Products Act official assessor**



**Part D – Additional information about specific role**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **1.** | **Applicant’s name:** | | | |
| **2.** | **New Application Change to species of existing appointment** | | | |
| **3.** | **Reason for appointment: Examinations in the area(s) ticked below:** | | | |
| **Tick** | **Ante-mortem examination** | | **Tick** | **Post-mortem examination** |
|  | Sheep / Goats | |  | Sheep / Goats |
|  | Lambs | |  | Lambs |
|  | Cattle | |  | Cattle |
|  | Bobby Calves | |  | Bobby Calves |
|  | Deer | |  | Deer |
|  | Horses | |  | Horses |
|  | Pigs | |  | Pigs |
|  | Ostriches and Emus | |  | Ostriches and Emus |
|  | Possums | |  | Possums |
|  | Other (specify) | |  | Rabbits and Hares |
|  |  | |  | Wild and Game Estate Deer |
|  |  | |  | Wild and Game Estate species (other than  Possums/Rabbit and Hares/Wild and Game Estate Deer) |
|  |  | |  | Camelids (Llamas/Alpacas) |
| **4. On-site Training Supervisor** | | | | |
| I confirm that the applicant has completed the prescribed training and competency assessment by workplace assessor(s) and Advice of Attainment of Unit Standards is attached | | | | |
| Signed: Date  Print Name:  Position: | | | | |
| Courier delivery address for where to send the appointment documents: | | AsureQuality | | |

**Email the whole application (Parts A, B, C and D *plus* supporting information *plus* a jpg photo) to**

**appointments@mpi.govt.nz**