

Request & Consent Form

### Section 1: Agency to complete

For more information please see the Guide to PVS Request & Consent Form

(https://www.police.govt.nz/advice-services/businesses-and-organisations/nz-police-vetting-service/forms-and-guides)

This form refers to the Policing (Police Vetting) Amendment Bill ("Vetting Bill"), which is expected to amend the Policing Act 2008

1.1 Name of agency submitting vetting	g request		
Live Better (cultural centre trust)			
1.2 Name of the person being vetted			
1.3 Description of the role of the perso	on being vetted		
This is a brief description of the role (not t unclear from the following questions.	he job title). This is us	ed by Police to help de	ecide what type of vet is conducted if it is
community group Volunteer			
1.4 Which groups will the person bein	g vetted be working	with (select all that	apply):
☑ Children/ Young People		⊠ Vulnerable Adult	:s
1.5 Does the role involve caring for pe	ople in the home of	the person being v	etted?
This is about whether the person being ve adults visiting the home of the person being	·		ome (that is, are vulnerable children or
☐ Yes		⊠ No	
1.6 Is the person being vetted:			
☐ A paid worker	☑ A volunteer		☐ Undertaking vocational or educational training
1.7 Is the person being vetted a Childr	en's Worker accordi	ng to the <u>Children's</u>	Act 2014, section 23(1)?
If the person being vetted is not working v If the person being vetted IS working with			
⊠ Yes		□ No (skip to quest	ion 1.9)
1.8 Is the role of the person being vett section 23(1)?	ted a core or non-co	re worker role acco	rding to the Children's Act 2014,
		☐ Non-core worker	





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1.9 Has the pe	rson being vetted previously been Po	olice vetted by your ag	ency?	
□ Yes		⊠ No (skip to	question 1.11)	
1.10 Is the per	son being vetted still working in the	role for which your ag	ency last obtained a Polic	ce vet?
If this request is	a renewal of the person's previous vet fo	or this role, please select	Yes. Otherwise, answer No	
□ Yes		☐ No – the perposition	rson being vetted is applyi	ng for a new role or
1.11 What is th	ne job title of the person being vette	d?		
This is the title o	f the job they are being vetted for.			
Kids ,Youth, Par	ents group Volunteer			
1 12 Fyidence	of identity (to be completed by agen	cy representative or id	lentity referee)	
			ichtity referee/	
	form guide for details on how to comp		h	
⊠ A primary iD	has been sighted (mandatory)	A secondary ID has	been sighted (mandatory)	
□ One form of	ID is photographic (mandatory)	☐ Evidence of name of	hange has been sighted (if	applicable)
<b>OR:</b> If your agen	cy is able to accept a verified RealMe ide	entity then:		
☐ An assertion	of a RealMe identity has been received	(see the <u>consent form g</u>	uide for further informatio	n)
In making this	request, I confirm that:			
✓ I have com	plied and will comply with the Approve	ed Agency Agreement ar	nd the <u>Vetting Bill.</u>	
✓ I am satisf	ied as to the identity of the person bein	g vetted.		
1 Lhava abtr	singd the authorication of the person b	aing vattad ta submit th	is votting request as set ou	tin section 2.4 of
this form.	ained the authorisation of the person b	eing vetted to submit th	is vetting request as set ou	t III section 2.4 of
✓ For vetting	g requests on individuals aged 14 or 15,	I have obtained the aut	horisation of a parent or gu	uardian.
Agency Represe	ntative:			
Full name:			Date: (dd/mm/yyyy)	
Signature:			Electronic signature: *	

<sup>\*</sup> If applicable, ticking this box constitutes an electronic signature and your consent for its use in this form.



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### Section 2: Person being vetted to complete and return to agency

This form refers to the Policing (Police Vetting) Amendment Bill ("Vetting Bill"), which is expected to amend the Policing Act 2008

**The purpose of this form is to allow the New Zealand Police Vetting Service to** confirm who you are using Police records, carry out a Police vet, and obtain your consent to share any relevant information with the agency that requested the vet.

**What you are consenting to.** You are agreeing that the Police Vetting Service can share relevant information they hold about you (if any) with the requesting agency. This information will be used to help the agency decide whether you are suitable for the role they are considering you for or that you are engaged in.

The information that may be shared is outlined in *section 2.4* of this form. For further details, you should refer to the <u>Vetting Bill</u> or visit the <u>Police vetting website</u>.

**Who collects your consent.** The agency requesting the Police vet will collect your signed consent.

The law that applies. Your consent is required by law. We are asking for your consent under the Vetting Bill.

**Your rights under the Privacy Act 2020 include:** you may request a copy of the Police vet report provided to the agency by contacting the agency. You can withdraw your consent to a Police vet at any time before the vetting process is complete by contacting the agency. The agency may keep the Police vet only for as long as required for vetting purposes.

You may request correction of your personal information at any time at police.govt.nz -> requesting information.

**How long the information is valid for.** The information in the Police vet is correct only at the time it is shared. It is up to the agency to decide how often they ask for updated vetting.

2.1 Personal information			* Mandatory field
Family/ last name * (that you are most commonly known by			
Given/ first and middle name(s) *			
Gender *		pirth * (dd/mm/yyyy) 14 years of age or over)	
Place of birth (Town/ City/ State)			
Country of birth *			
NZ Driver Licence number			
Name of parent or guardian (if person being vetted is 14 or 15 years o	ld *)		

#### 2.2 Other names

Please include all other names you are or have been known by. Including, but not limited to: previous legal names (eg. maiden names, or due to divorce or adoption), aliases used, name changes by deed poll. Include ALL names - first, middle and last.

Family name	First name	Middle names

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2.3 Permanent residential addre	ss		* Mandatory field
Flat/ number - and street name *			
Suburb		Post Code	
Town/ City *			

#### 2.4 Your consent to share information

1. A Police vet will include the following information, if held by New Zealand Police. Please refer to the <u>Police</u> <u>vetting website</u> for more information regarding the <u>Clean Slate Scheme</u>, what may be released, and the vetting process.

#### Either:

a. A result indicating that no information is held or relevant to the purpose of the vetting request,

#### Or, one or both of:

- b. The vetting subject's criminal record (if any), unless the Clean Slate Scheme applies.
- c. A summary of other information that is readily retrievable, relevant to the purpose of the vetting request, and deemed accurate.

**This may include** pending charges, charges without conviction, youth court charges, infringement offences, demerit points, arrest warrants, involvement in family violence, overseas convictions, police investigations without charges, interactions with Police, and other information held by Police.

Information may also be released where it is subject to a suppression order or statutory prohibition, involves offences by individuals under 18, or relates to mental health or substance abuse issues.

2. If you are vetted as a Children's Worker, and you continue to hold that role, the Police Vetting Service may release any newly obtained relevant information to the requesting agency at any time.

The Police Vetting Service will take reasonable steps to:

- a. —confirm that the purpose of the Police vet remains valid for example, that you are still employed or engaged as a Children's Worker, and
- b. notify you before any information is disclosed.
- 3. Information provided in this consent form may be used to update New Zealand Police records.

Authorisation of person being vetted:		
✓ I confirm that the information I have provided in this form is about me and is	correct.	
✓ I have read and understood the information above.		
✓ I authorise New Zealand Police to disclose any personal information relevant the agency making this request.	to this application (as described above)	to
Full name:	Date: (dd/mm/yyyy)	

If you are 14 or 15 years of age (as at the date of the application) please provide consent from a parent or guardian.

Parent/Guardian's full name:	Date: (dd/mm/yyyy)	

Electronic signature: \*

Signature:



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ardian's signature:

<sup>\*</sup> If applicable, ticking this box constitutes an electronic signature and your consent for its use in this form.