



QUEENSLAND POLICE
AUTHORITY AND INDEMNIFICATION

**CONSENT TO CHECK NATIONAL POLICE
RECORDS AND ADVISE A THIRD PARTY**

(Family Name)	MR/MRS/MS/MISS
(Given Names)	
(Former Maiden Name, Married Name/s, or Aliases)	
(Residential Address)	POSTCODE
TELEPHONE	PRIVATE () BUSINESS ()

DATE OF BIRTH	/ /	PLACE OF BIRTH	Eg. Brisbane, Australia
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PROOF OF IDENTITY REQUIRED

Attach a legible -

photocopy of your current Driver's Licence OR
photocopy of your current passport including photograph and signature OR
photocopies of two other forms of identification bearing your signature

NAME OF THIRD PARTY	Queensland Fire and Emergency Services
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This check is for the purpose of undertaking work with the Third Party that is **PAID** **UNPAID**

Have you lived in New Zealand for at least 12 months in the last 10 years since the age of 16? <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, please complete New Zealand Police Vetting form overleaf
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I, _____ whose personal particulars are set out above, authorise the Commissioner of Police or his servants or agents to:

check my name against records that are held by the Queensland Police Service or are available to them nationally from other Australian Police Services, and I further agree to provide my fingerprint impressions if required for checking purposes, and if I do not have a conviction or if I only have a conviction that cannot be disclosed by virtue of the Criminal Law (Rehabilitation of Offenders) Act 1986 (Qld) to advise the above-named third party that I do not have a conviction that can be disclosed. If I have a conviction that can be disclosed, I authorise the disclosure to the above-named third party of the details of that conviction. I clearly understand that any details disclosed to the above-named third party will be considered by them and may affect any application I have made with them for a position of trust or employment, or as the case may be.

I hereby agree not to take or suffer or permit to be taken any legal action whatsoever or howsoever against the Crown in the right of the State of Queensland, the Commissioner of Police or any member or agent of the Queensland Police Service in respect of advice given to a third party or the disclosure or use of information relating in any way to records under the name supplied.

SIGNATURE OF PERSON	
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IN THE PRESENCE OF

SIGNATURE OF WITNESS			
PRINTED NAME OF WITNESS		DATE	/ /

Section 1: Australian Approved Agency to complete (or its duly authorised agent)

Name of Applicant to be vetted:

Name of Australian Approved Agency submitting vetting request:

APPLICANT'S ROLE – PURPOSE OF VET

- Employee
 Contractor/consultant
 Volunteer
 License/Registration
 Vocational Training
 Other: (please specify here)

Description of role / licence / registration (e.g. caregiver; cleaner; taxi driver; teacher; etc):

What group(s) will the applicant have contact with in their role for your agency?

- Children/Youth
 Elderly
 Other Vulnerable Adults
 Other: (please specify here)

What is the applicant's **primary** role for your agency?

- Care & Protection (Children/Youth)
 Care & Protection (Elderly/Vulnerable Adults)
 Education
 Healthcare
 Other: (please specify here)

Application of Criminal Records (Clean Slate) Act 2004:

The NZ Police Vetting Service must comply with the Criminal Records (Clean Slate) Act 2004. Your answers to the above questions will assist us in determining what section of the act applies to this vetting request.

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 Act, e.g. teacher, doctor/nurse, rest home carer.

Section 19(3) (Exception): All criminal convictions will be released EVEN IF the applicant is eligible for clean slate.

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 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, foster/home stay parent, applicant for adoption) [section 19(3)(e)].

For information on the clean slate regime, see <http://www.justice.govt.nz/services/criminal-records/about-the-criminal-records-clean-slate-act-2004>.

Section 1 continued:**Australian Approved Agency to complete or its duly
authorise agent****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 have (or my delegate has), OR, 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, firearms licence, etc; *see link above*)

and

Another form of ID (e.g. driver licence, 18+ card, Community Services Card, etc; *see link above*)

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, and not be related, or a partner/spouse, or a co-resident of applicant, and be either a person of standing in the community (e.g. registered professional, religious or community leader) or registered with the Approved Agency. 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)

[B] I have received an assertion of a RealMe verified identity

- limited to agencies who are able to use RealMe to verify identity
- for further information, see <https://www.realme.govt.nz/>

CHECKLIST

In making this request, I confirm that:

- I have complied and will comply with the Offshore Approved Agency Arrangement between NZ Police and the Australian 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.

Australian Approved Agency Authorised Representative:

Name:

Signature:

Date:

Name of Australian Approved Agency submitting vetting request:

Section 2:

Applicant to complete and return to Australian Approved Agency or its duly authorised agent (the Australian Approved Agency will submit the vetting request to NZ Police and receive the vetting result)

PERSONAL INFORMATION

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

*Family name: (Primary)	<input type="text"/>	First name(s): (Primary)	<input type="text"/>	<input type="text"/>
*Gender:	(M) <input type="checkbox"/> (F) <input type="checkbox"/> (Other) <input type="checkbox"/>	*Date of birth: (dd/mm/yyyy)	<input type="text"/>	
*Place of birth: (town/city/state)	<input type="text"/>	*Place of birth: (country)	<input type="text"/>	
NZ Driver Licence number: (*where held - for ID verification by NZ Police)	<input type="text"/>			

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) <input type="checkbox"/> (M) <input type="checkbox"/> (P) <input type="checkbox"/>	<input type="text"/>	First name(s): (A) <input type="checkbox"/> (M) <input type="checkbox"/> (P) <input type="checkbox"/>	<input type="text"/>	<input type="text"/>
Family name: (A) <input type="checkbox"/> (M) <input type="checkbox"/> (P) <input type="checkbox"/>	<input type="text"/>	First name(s): (A) <input type="checkbox"/> (M) <input type="checkbox"/> (P) <input type="checkbox"/>	<input type="text"/>	<input type="text"/>
Family name: (A) <input type="checkbox"/> (M) <input type="checkbox"/> (P) <input type="checkbox"/>	<input type="text"/>	First name(s): (A) <input type="checkbox"/> (M) <input type="checkbox"/> (P) <input type="checkbox"/>	<input type="text"/>	<input type="text"/>
Family name: (A) <input type="checkbox"/> (M) <input type="checkbox"/> (P) <input type="checkbox"/>	<input type="text"/>	First name(s): (A) <input type="checkbox"/> (M) <input type="checkbox"/> (P) <input type="checkbox"/>	<input type="text"/>	<input type="text"/>

Permanent/Former New Zealand Residential Address:

*Number/Street:	<input type="text"/>		
Suburb:	<input type="text"/>	Post Code:	<input type="text"/>
*City/Town/ Rural District:	<input type="text"/>	*Period of Residence:	<input type="text"/>

Section 2:
continued

Applicant to complete and return to Australian Approved Agency or its agent (the Approved Agency will submit the vetting request to NZ Police and receive the vetting result)

CONSENT TO DISCLOSURE (for a New Zealand Police Vet)

- 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 release in a vetting result comprises convictions, active charges and warrants to arrest.
2. Any conviction history will be released in accordance with the Criminal Records (Clean Slate) (NZ) 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):
 - (i) my criminal record of convictions will not be disclosed; but
 - (ii) 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.
3. Where relevant information is subject to statutory or Court ordered name suppression or prohibition 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. Any personal information contained on this form may be used by NZ Police to update its records.
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 Australian Approved Agency who will immediately notify NZ Police to cease the vetting process (any fee remains payable by the Australian Approved Agency).
7. I am entitled to access the vetting result released to the Australian Approved Agency and seek correction of Police information about me in accordance with the Privacy Act 1993 by making a request to the 'Australian Approved Agency' in the first instance.
8. No later than twelve months after the release of the vetting result, the Australian Approved Agency will securely dispose of this consent form and copies of identification documents, as well as the vetting result released by NZ Police, unless a longer retention period is required by legislation.
9. The information I provided in this form relates to me and is correct.

Authorisation

I **authorise** NZ Police to disclose any personal information it considers relevant to my application to the Australian Approved Agency making this request for the purpose of assessing my suitability.

Signature of applicant

Date: