

**New Zealand/German Student Exchange
Authorisation to disclose information**

Name of student _____ School _____
Exception – section 19(3)(e) Criminal Records (Clean Slate) Act 2004

To: Licensing and Vetting Service Centre
Police National Headquarters
PO Box 3017
Wellington 6140

Note:
A stamped, self-addressed
envelope must accompany
all requests

To be completed by organisation that is to receive the personal information:

I believe that the exception contained in section 19(3)(e) of the Criminal Records (Clean Slate) Act 2004 applies to this vetting request – the individual concerned has made an application to act in a role predominantly involving the care and protection of a child, young person or more vulnerable member of society, but not predominantly involving the delivery of education. The role parallels that of a parent/guardian/caregiver, in the child's or caregiver's home, or sole supervisor in an overnight situation.

The role the applicant will be acting in is that of (please circle):

Caregiver **Homestay Host Family** Paediatric Nurse Other (specify): _____

I have explained the purpose for the vetting check, and agree that I will discuss the outcome or any Police comments with the applicant.

Signed by Manager/Supervisor: _____

Print full name of Manager: Margot Glaser-Brown

To be completed by individual authorising release of personal information:

I authorise Police to disclose **ANY** information relating to any interaction I have had with Police in any context, which may include family violence. It may include interactions where I have been a victim or complainant. I confirm that I am aware that my full criminal incidents record will be released even if I meet the eligibility criteria stipulated in section 7 of the Criminal Records (Clean Slate) Act 2004 due to the application of the exception in section 19(3) of that Act, as set out above.

Signed: _____ Date: _____

Name: _____
Surname *First name(s)*

Maiden or any other names used Sex: _____ (M/F)

Date of birth: _____ Place of birth: _____

Nationality: _____ NZ Driver licence no.: _____

Full **residential** address: _____
Street name and number

Suburb, City/town

Comments of the New Zealand Police: