

Fit and proper assessment

This form is part of the legislative requirements to obtain certain authorisations under the Health and Safety at Work (Hazardous Substances) Regulations 2017

Please print clearly. Make sure the whole form is completed and all necessary documents are attached.

This form contains potentially sensitive information. To protect the privacy of this information, WorkSafe New Zealand has separated the fit and proper person assessment from the main application form.

Checklist

- | | |
|------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <input type="radio"/> Fit and proper assessment form completed | <input type="radio"/> Recent overseas police certificate(s) provided (if applicable); police certificates need to be less than three months old from time of making your application |
| <input type="radio"/> Consent (section 3) for New Zealand Police signed within the last three months | |

1. Applicant details

Name

This should be your full legal name as recorded on your birth certificate, unless your name has been legally changed. Include any other name used now or in the past and reasons for this.

First name:

Middle name(s):

Last name:

Other names used:

Reasons for other name(s):

Age and gender

Date of birth: DD / MM / YEAR

Place of birth: (town/city)

Country of birth:

Gender: Female Male Gender diverse

New Zealand driver licence

Please include your driver licence details if you have one.

New Zealand driver licence number:

Expiry date: DD / MM / YEAR

Address

Postal address: (include postcode)

Residential address: (include postcode)

Mobile phone:

Home phone:

Work phone:

Email:

2. Fit and proper person assessment

Criminal and behavioural history

To hold authorisations you are required to be a fit and proper person. This applies at all times while your authorisation is valid.

The following information is collected under regulations 6.5 and 6.7 or regulations 7.1 and 7.2 of the Health and Safety at Work (Hazardous Substances) Regulations 2017. Refer to section 5 for how the privacy of your information is managed. Note that you may be eligible under the Criminal Records (Clean Slate) Act 2004 to state that you have no criminal record even if you do have convictions. For more information, refer to the Ministry of Justice website.

Fit and proper assessment

Answer the following questions by ticking the box that applies to you.

1. Do you have any pending criminal proceedings against you, whether in New Zealand or elsewhere?	<input type="radio"/> Yes <input type="radio"/> No
2. Have you been convicted of and/or sentenced in respect of an offence within the last seven years, whether in New Zealand or elsewhere?	<input type="radio"/> Yes <input type="radio"/> No
3. Have you ever had a protection order or orders (including a temporary protection order) made against you, whether in New Zealand or elsewhere?	<input type="radio"/> Yes <input type="radio"/> No
4. Have you had four or more infringement notices issued against you in the last two years (such as for traffic offences)?	<input type="radio"/> Yes <input type="radio"/> No
5. Have you received any infringement notices which relate to a hazardous substance, whether in New Zealand or elsewhere?	<input type="radio"/> Yes <input type="radio"/> No
6. Do you have a history of drug or alcohol abuse regardless of whether or not you have been convicted of a drug or alcohol-related offence?	<input type="radio"/> Yes <input type="radio"/> No
7. Do you have a history of violence or causing damage to any person or property regardless of whether or not you have been convicted of any violent offence?	<input type="radio"/> Yes <input type="radio"/> No
8. Do you have any health condition (physical or mental) that would prevent you performing the function of the authorisation you are applying for (for example, safely using or having possession of a controlled substance)?	<input type="radio"/> Yes <input type="radio"/> No
9. Have you been a member of, supported or encouraged any political, religious, national or ethnic organisation or group that advocates the: <ul style="list-style-type: none">- use of violence or criminal activities to achieve its purpose or- undermining of the Government of New Zealand or any other country by unlawful means or- violation of the civil rights of any ethnic, religious or political group.	<input type="radio"/> Yes <input type="radio"/> No
10. Have you had any authorisations (such as a firearms licence, certificate of competence, controlled substance licence, asbestos licence, occupational diving licence) suspended, cancelled or revoked, whether in New Zealand or elsewhere?	<input type="radio"/> Yes <input type="radio"/> No
If you ticked yes for questions 5 to 10, give further details:	

Criminal history (international applicants)

This section applies only to applicants who have lived 12 months or more in a country overseas within the last five years.

Note that the 12 months do not need to be consecutive.

Attach a police report of your criminal and infringement history (including transport offences) from all countries outside of New Zealand. The report must be issued from the relevant local law enforcement agency. All documents not in English must be translated. Original documents must be sent in with the English translation.

Include all countries in which you have lived for 12 months or more within the last five years. Your report containing your criminal record history (including transport offences) must be current and less than three months old when you submit your application.

Countries I have lived in:

Relevant reports of my criminal record history are attached to this application.

New Zealand Police service request and consent

All applicants must read and complete this section.

The consent form is based on form NZPVS-CS - 05/19 published by the New Zealand Police Vetting Service.

CONSENT FOR NEW ZEALAND POLICE TO RELEASE INFORMATION

- The New Zealand Police may release any information they hold if relevant to the purpose of this service 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, including family violence incidents, and investigations that did not result in prosecution
 - information subject to name suppression where that information is necessary to the purpose of the vet.
- If I am eligible under the Criminal Records (Clean Slate) Act 2004, my conviction history will not be released **unless**:
 - Section 19(3) of the Clean Slate Act applies to this request (exceptions to the clean slate regime)
 - Section 31(3) of the Children's Act 2014 applies to this request (safety checks of core children's workers).
- The New Zealand Police may disclose new relevant information to WorkSafe after the completion of the check in the following circumstances:
 - the service request was submitted as part of a children's worker safety check under the Children's Act 2014
 - the Police check was completed within the past three years
 - the release of new information is considered justified under the Privacy Act 2020 and
 - the New Zealand Police will endeavour to notify you prior to the disclose.
- Information provided in this form may be used to update New Zealand Police records.
- I am entitled to a copy of the Police check result released to WorkSafe (to be provided by the agency) and can seek a correction by contacting the New Zealand Police
- I may withdraw this consent, prior to the Police's disclosure of the check result, by notifying WorkSafe.

Fit and proper assessment

3. Consent

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 WorkSafe for the purpose of assessing my suitability for authorisation as a compliance certifier or for a controlled substance licence.

I understand that Information released to WorkSafe will be kept for compliance assurance and for the purpose of administering the relevant part of the Health and Safety at Work (HS) Regulations 2017.

I acknowledge that any personal information will be processed and held by WorkSafe and that under the Privacy Act 2020 I am entitled to access this information and to ask for correction should that be necessary.

I authorise WorkSafe to make inquiries into my fitness and to verify any of my personal information held by WorkSafe with the relevant agency or individual concerned (including where relevant any overseas agency or individual).

I authorise the relevant agency or individual concerned to disclose any information that the agency or individual holds about me that is relevant to administering the relevant part of the Health and Safety at Work (Hazardous Substances) Regulations 2017 linked to my application.

I understand that the provision of false or misleading information may constitute an offence and also may result in my application being declined.

Signature of applicant:

this day of 20

This application must be received by WorkSafe within three months of being signed.

4. Statutory declaration

I, (full name)

of (address in full)

Solemnly and sincerely declare that the information I have provided in this form relates to me, is true, complete, and correct.

And I make this solemn declaration conscientiously believing the same to be true and by virtue of the Oaths and Declarations Act 1957.

Signature of applicant:

Declared at: (place where you are making declaration)

this day of 20

Before me: (full name)

Signature:

- Barrister or Solicitor of the High Court of New Zealand
- Justice of the Peace
- Notary Public
- Registrar or Deputy Registrar of a New Zealand Court
- Member of Parliament
- A person authorised by law to take statutory declarations

Please stamp: (if applicable)

5. Privacy Statement

We collect personal information from you, including information as follows:

- your name;
- contact information;
- location;
- driver's licence details;
- criminal or behavioural history (including whether you have criminal convictions, are being investigated or have pending charges, have/or have had a protection order against you);
- health information (any condition mental or physical or any alcohol or drug addiction that would prevent you from performing the function of the authorisation sought);
- information pertaining to revoked authorisations;
- information pertaining to involvement with any organisation that uses violence or criminal activities in its purpose or undermine the New Zealand Government or violate civil, ethnic, religious or political rights.

We will also review your compliance history with WorkSafe or any of its predecessors.

We collect your personal information under regulations 6.5 and 6.7 or regulations 7.1 and 7.2 of the Health and Safety at Work (Hazardous Substances) Regulations 2017 in order to consider whether or not you are a fit and proper person in order to determine your authorisation as a compliance certifier or for a controlled substance licence.

Besides our staff, we share this information with the New Zealand Police in order to obtain a copy of your criminal convictions and seek their views on your application.

Providing some information is optional. However, if you choose not to enter any of the information sought on the application form, we'll be unable to consider whether or not you meet the criteria for the authorisation you seek.

We keep your information secure on locked premises and only allow access to that information by authorised persons in order to complete the function of determining whether or not you are fit and proper in terms of the authorisation to be granted.

We keep your information for no longer than the duration of your authorisation and in line with the Public Records Act 2005 and WorkSafe's disposal schedule at which point we securely destroy it.

You have the right to ask for a copy of any personal information we hold about you, and to ask for it to be corrected if you think it is wrong. If you'd like to ask for a copy of your information, or to have it corrected, please contact us at hsapplications@worksafe.govt.nz, via mail at WorkSafe New Zealand, PO Box 165, Wellington 6140 or by phone at 0800 030 040.