

# Village Kids Home Based Care

## Authorisation to disclose information

### 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: \_\_\_\_\_

---

#### 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:

Agency code: V70068