



Ph: (07) 579-1090
Fax: (07) 579-1041
info@homesofhope.org.nz
www.homesofhope.org.nz
125 Moffat Road, Bethlehem, Tauranga

Consent to Disclosure of Information
Exception – Section 19(3)(e) Criminal Records (Clean Slate) Act 2004

To: Licensing and Vetting Service Centre
Office of the Commissioner of the Police
PO Box 3017
Wellington

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

To be completed by third party that is to receive the personal information

I declare 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, but not predominately involving the delivery of education, to a child or young person. The role the person will be acting in is that of (briefly describe role):

Signed: _____ Print Full Name: _____

To be completed by individual authorizing release of personal information

I hereby authorize you to disclose any information you may hold about me to the above signed third party. I confirm that I am aware that my full criminal 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 exception contained in section 19(3) of that Act, as set out above.

Signed: _____ Date: _____

Name: _____
Surname *First Names*

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

Date and place of birth: _____

Nationality: _____ Driver Licence no.: _____

Full residential address: _____
Street name and number

_____ *Suburb, City/town*

Comments of the New Zealand Police