



Homebased Childcare Services (Ltd)
Top Quality Education & Care for Children in small groups
15 Moody Ave, Whau Valley, Whangarei 0112
Ph: 09 459 1778, fax: 09 459 1779

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 Police
P.O. Box 3017
Wellington

Note: a stamped, self address
envelope must accompany all requests
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 predominantly 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). This person is looking at becoming an Educator to care and educator children in their own home or the family home. The husband/partner or any other member that is living in the home and over the age of 17 must also go through a police vet clearance, thank you.

Signed:  Print full name: Betje Johanna Read.

To be completed by individual authorising release of personal information.

I hereby authorise 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 the Act, as set out above.

First name: _____ Surname: _____

Maiden or any other names used: _____ Sex: M F Nationality: _____

Full residential Address: (street name and number) _____

Suburb: _____, City/town: _____ Post code: _____

Date of Birth: _____ Place of Birth: _____

Phone number: _____ mobile: _____ Driver's licence number: _____

Signed: _____ date: _____