

Playcentre Aotearoa's Safety Checking Form for Intending Students/Employees



To the student/employee – please fill in the first section of this form within the bold border

Name:		Centre:
Phone:		Email:
5 year work History /CV*		
Year/s	Employer (Volunteer or Paid or NA)	Role
Referee (not related or extended family)*		
Name		
Relationship		
Contact		

Safety Checking Identity Confirmation (To be completed by Playcentre Aotearoa employees)		
	Details of copy	Name/Date
Primary ID ^	Attached and verified Y/N (circle one)	
Secondary ID^	Attached and verified Y/N (circle one)	
Identity Confirmed^	Photo on ID matches applicant, OR Identity referee documents attached ¹ (delete option which does not apply)	
Police Vet form completed	Attached Y/N (circle one)	
REGIONAL USE ONLY:	Date and/or Outcome	Signature to show completed
Police Vet Submitted		
Police Vet returned	Outcome:	
Interview Completed*		
Referee Contacted*	Outcome:	



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Search NZPF Records/ Teacher Registration if applicable		
Risk Assessment	No Risks Identified/Action Plan (attached)/Risk too high	
Update Records	Entered into SMS. Completed form filed with student/employee records	
Individual Informed	Email/phone/Mail	

Applicant declarations

I, _____, understand that by completing this form and the attached police vetting form I am consenting to Te Whānau Tupu Ngātahi o Aotearoa-Playcentre Aotearoa, Inc. undertaking a safety check including a Police vet on me.

I hereby confirm that all information provided in this document, any additional application documents and interviews done relating to this role are true and correct to the best of my knowledge.

I understand that the results of any Police Vet will be retained for the length of time that I am engaged in the Playcentre Education Programme and/or employed by Playcentre, or until it is replaced by a new Police Vet result.

I consent to the outcomes of this safety check being shared with the Playcentre at which I am currently applying to be involved, any future Playcentres I may wish to work or train at, and to the Playcentre Education Programme database if I am or wish to be involved with the adult education programme.

If this is a Safety Check Renewal, please tick one of the below:

- I confirm my name has not changed since the previous safety check completed on me
- I have changed my name since the previous safety check completed on me and I will provide original documentation supporting this change.

Signed _____

(Applicant)

Date: _____

¹ Applies when the person has no photo ID – ask Regional Education Co-ordinator or Education Admin/Centre Support Admin if you need to use this option

* Not required for people who are already employed or engaged by Playcentre, or for the safety check renewal

^ Not required for the safety check renewal – unless name has been changed, then proof of new name is required, see below.

