

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



To the student/employee – please fill in page 1 of this form, including the Applicant declaration section.

This form will be kept for 3 years or until a new check is completed or the individual is no longer engaged with Playcentre, whichever is sooner

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		

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, and assessing any risks I may present to tamariki or the centre.

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: _____



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Applicant Name: _____ Centre: _____

Playcentre Aotearoa Employees- please ensure you complete this form fully, recording outcomes, and signing/dating each box as you complete them. You must ensure that once the risk assessment has been completed, the outcome is recorded on this form.

Safety Checking Identity Confirmation (To be completed by Playcentre Aotearoa employees)		
	Details of copy	Name of Person verifying <u>and</u> Date.
Primary ID ^	Attached and verified? Yes No	
Secondary ID^	Attached and verified? Yes No	
Identity Confirmed^ <i>(delete option which does not apply)</i>	Photo on ID matches applicant, <u>OR</u> Identity referee documents attached ¹	
Police Vet form completed	Attached? Yes No	
REGIONAL USE ONLY:	Date and/or Outcome	Signature to show completed
Police Vet Submitted		
Police Vet returned	Outcome:	
Interview Completed*		
Referee Contacted*	Outcome:	
Search NZPF Records/ Teacher Registration if applicable		
Risk Assessment	No Risks Identified/Action Plan (attached)/Risk too high <i>(circle one)</i>	
Update Records	Entered into SMS. Completed form filed with student/employee records	
Individual Informed	Email/phone/Mail <i>(circle as appropriate)</i>	

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.

