

**PLEASE COMPLETE THIS FORM AND SEND IT WITH YOUR APPLICATION TO:**

P.O. Box 303-220 North Harbour Auckland 1330

We will send to the Licensing and Vetting Service Centre on your behalf. Once received back all records will be kept securely.

**Consent to disclosure of information – position outside New Zealand**  
***Criminal Records (Clean Slate) Act 2004***

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

I declare that section 14(3)(b)(ii) of the Criminal Records (Clean Slate) Act 2004 applies to this vetting request – the question about this individual's criminal record is asked in New Zealand but relates to a matter dealt with by the law of a foreign country. As such the individual is not authorised by the Criminal Records (Clean Slate) Act 2004 to answer a question asked of him or her about his or her criminal record by stating that he or she has no criminal record as provided by section 14(1)&(2) of the Criminal Records (Clean Slate) Act 2004.

Signed: *Vicki Kenny*

Print full name: Vicki Kenny

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**To be completed by individual authorising release of personal information**

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 section 14(3)(ii) 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*

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**Comments of the New Zealand Police**