

POLICE CONSENT TO DISCLOSURE OF INFORMATION

The Manager
Licensing and Vetting Service Centre
Office of the Commissioner
PO Box 3017
WELLINGTON

I,
(Surname) (Fore Names)

.....
(Maiden or any other names used)

Sex(M/F) Date and Place of Birth

Nationality Residential Address

Suburb City

NZ Driver Licence number

hereby consent to the disclosure by the New Zealand Police of any information they may have pursuant to this application, to Tui Ora Limited. I understand that any record of criminal convictions I might have will automatically be concealed if I meet the eligibility criteria stipulated in Section 7 of the Criminal Records (Clean Slate) Act 2004.

Because of the time taken for this process to be completed any appointment made will be conditional on the applicant having no criminal conviction that may make the appointment inappropriate.

Signed Date

COMMENTS OF THE NEW ZEALAND POLICE

Please return to:

**Tui Ora Limited
PO Box 8119
New Plymouth
Attention: Human Resources**

Agency Code T30434