



# RANGIORA NEW LIFE SCHOOL

PRINCIPAL ~ GREGG WEAVER

DENCHS ROAD, RANGIORA

PH ~ (03) 313 6332 FAX ~ (03) 313 6237

EMAIL ~ admin@rnl.school.nz www.rnl.school.nz

## CONSENT TO DISCLOSURE OF INFORMATION

Licensing & 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 Drivers Licence Number .....

hereby consent to the disclosure by the New Zealand Police of any information they may have pursuant to this application, to **Rangiora New Life School**. 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.

Signed ..... Date .....

## COMMENTS OF THE NEW ZEALAND POLICE

A stamped self-addressed envelope must accompany all requests.