New Zealand Artificial Limbs Service (NZALS)

Appointment Application Form

Appointments to the NZALS are made in accordance with the provisions of the Crown Entities Act 2004.

The appointment process is managed by the Ministry of Social Development, on behalf of the Minister for Social Development. The decision and authority to appoint rests with the Minister for Social Development.

Section 31 (1) of the Crown Entities Act 2004 requires that before a person is appointed as a member of a statutory entity, the person must:

* consent in writing to being a member
* certify that they are not disqualified from being a member
* disclose the nature and extent of all interest that the person has at that time, or is likely to have, in matters relating to entity.

This application form is designed to establish that you can meet the above requirements.

The Crown Entities Act 2004 can be viewed online at [www.legislation.govt.nz](http://www.legislation.govt.nz).

Please note that all information provided will be kept confidential and limited to those who have a requirement to know for the appointment process and for management of the nominee if they are offered and accept the role.

Should you have any questions please email [nominations@msd.govt.nz](mailto:nominations@msd.govt.nz).

1. **Your Contact Details**

|  |  |
| --- | --- |
| Title: |  |
| Last Name: |  |
| First Name(s): |  |
| Postal Address: |  |
| Residential Address: |  |
| Email Address: |  |
| Contact Phone Number: |  |

1. **Right to Work in New Zealand**

Please tick the relevant boxes. To be legally entitled to work in New Zealand you should be a New Zealand (NZ) citizen, have Permanent Resident status, or have a current work permit.

|  |  |
| --- | --- |
| NZ Citizen | Yes  No  |
| Permanent Resident of NZ | Yes  No  |
| Current work permit | Yes  No  |

1. **Government Appointments**

Please provide details of any current or previous government appointments, including the years for each role. Please continue on a separate sheet if necessary.

|  |
| --- |
|  |

1. **Certification Not Disqualified from Appointment**

Under section 30(2) of the Crown Entities Act 2004, you are disqualified from being a member of a statutory entity, such as the NZALS, if you are:

* an un-discharged bankrupt
* prohibited from being a director or promoter of, or being concerned or taking part in the management of, an incorporated or unincorporated body under the [Companies Act 1993](http://www.legislation.govt.nz/act/public/2004/0115/latest/link.aspx?id=DLM319569#DLM319569), or the [Securities Act 1978](http://www.legislation.govt.nz/act/public/2004/0115/latest/link.aspx?id=DLM25999#DLM25999), or the [Securities Markets Act 1988](http://www.legislation.govt.nz/act/public/2004/0115/latest/link.aspx?id=DLM139726#DLM139726), or the [Takeovers Act 1993](http://www.legislation.govt.nz/act/public/2004/0115/latest/link.aspx?id=DLM325508#DLM325508)
* subject to a property order under the [Protection of Personal and Property Rights Act 1988](http://www.legislation.govt.nz/act/public/2004/0115/latest/link.aspx?id=DLM126527#DLM126527)
* a person in respect of whom a personal order has been made under that Act that reflects adversely on the person's—
  + (i) competence to manage his or her own affairs in relation to his or her property; or
  + (ii) capacity to make or to communicate decisions relating to any particular aspect or aspects of his or her personal care and welfare:
* a person who has been convicted of an offence punishable by imprisonment for a term of two years or more, or who has been sentenced to imprisonment for any other offence, unless that person has obtained a pardon, served the sentence, or otherwise suffered the penalty imposed on the person
* a member of Parliament
* disqualified under another Act.

I,

(full legal name)

certify that **I am not** disqualified from being appointed to the NZALS under section 30(2) of the Crown Entities Act 2004.

1. **Conflicts of Interest**

This includes, but is not limited to:

* any other forms of employment
* any directorships, board memberships, trusteeships
* any memberships to other organisations – paid or voluntary
* interests in business enterprises or professional practices
* share ownership
* beneficial or other interests in trusts
* professional or personal relationships with the crown body concerned
* personal associations or relationships with other groups or organisations
* family relationships.

Please tick the correct option below, and provide details where required.

I have **no current or previous** financial, professional or personal interests which might create a conflict if I were to be appointed to the NZALS.

Or

I **have current or previous** financial, professional or personal interests which might create a conflict if I were to be appointed to the NZALS.

Details of these are:

|  |  |
| --- | --- |
| Issue | How this relates to NZALS |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |

1. **Issue of Probity**

This covers whether there is anything in your personal history that may compromise the integrity of the NZALS or otherwise make your appointment inappropriate. This would include, but is not limited to:

* any current or pending court actions
* any current or pending allegations, proven or otherwise, which could cause embarrassment to the NZALS or the Government.

Please tick the correct option below, and provide details where required.

I **do not** have actual or potential issues of probity which might compromise the integrity of the NZALS or which could cause embarrassment to the Government if I were to be appointed.

Or

I **do have** actual or potential issues of probity which might compromise the integrity of the NZALS or which could cause embarrassment to the Government if I were to be appointed to the NZALS. Details of these are:

|  |  |
| --- | --- |
| Issue | How this relates to the NZALS |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |

1. **Other Relevant Items**

Please advise of any additional matters which might be relevant should you be appointed to the NZALS.

|  |
| --- |
|  |

1. **Declaration**

I have read all information provided regarding the role, and have disclosed all actual or potential conflicts and all personal information relevant to appointment as a member of the NZALS.

I authorise the Ministry of Social Development to disclose such personal information to the Minister for Social Development as is necessary for the purposes above, and authorise the people and agencies contacted who hold the requested information about me to disclose that information to the Ministry of Social Development.

I authorise the Ministry of Social Development to collect personal information about me from any identified referee (if I am short-listed) to assess my suitability for appointment to the NZALS, and I authorise the Ministry of Social Development to disclose the necessary information to my referee for this purpose. I also authorise any referee I have named to disclose all relevant information to the Ministry of Social Development for the same purpose.

I acknowledge that information collected from me may be used for the selection process and where any review of appointment is sought.

|  |  |  |  |
| --- | --- | --- | --- |
| Signed |  | | |
|  |  |  |  |
| Name |  | | |
|  |  |  |  |
|  |  |  |  |
| Date |  | | |