

Safety Check Record



Deaf Education New Zealand

Name:	
-------	--

New children's worker

Role		
Core / non-core children's worker (please circle one)		
Element	Detail	Complete (please tick)
Identity confirmation – documentation		<input type="checkbox"/>
Identity confirmation – record search		<input type="checkbox"/>
Work history #		<input type="checkbox"/>
Interview #		<input type="checkbox"/>
Reference check #		<input type="checkbox"/>
Professional organisation membership*		<input type="checkbox"/>
Police vet*		<input type="checkbox"/>
Risk assessment^		<input type="checkbox"/>
In completing the required safety checks as per the Children's Act (2014) I deem Name: _____ Start Date: _____ to be suitable under the Children's Act (2014) to be working with children.		
Name:	Signed:	
Role:	Date:	

* Cross out one option

Elements do not apply for purposes of a safety check if children's worker is employed or engaged by Ko Taku Reo at the time the safety check is being undertaken.

^Based on the information gathered use professional judgement to identify patterns of concerning attitudes or behaviours. Ask the question, "Does this person pose, or would this person pose and risk to the safety of children as a children's worker."

OR

Existing children's worker

Role		
Core / non-core children's worker (please circle one)		
Date of previous safety check		
Element	Detail	Complete (please tick)
Identity confirmation – name change		<input type="checkbox"/>
Professional organisation membership*		<input type="checkbox"/>
Police vet*		<input type="checkbox"/>
Risk assessment^		<input type="checkbox"/>
In completing the required safety checks as per the Children's Act (2014) I deem Name: _____ Start Date: _____ to be suitable under the Children's Act (2014) to be working with children.		
Name:	Signed:	
Role:	Date:	