Strong Families Connected Communit

NGO Social Work Study Awards

APPLICATION FORM

AUGUST 2012



NOTES FOR APPLICANTS, EMPLOYERS AND EMPLOYEES

Making an application

This is a joint application process requiring employers and employees to work together on the application form. For your use and convenience, a screening criterion has been provided at the front of the application form and a checklist at the back. Please use these to ensure that your application is complete, as this application process is the main basis for selection. Note that the application form needs to be completed and signed by both the NGO employer and the employee intending to study.

Employers

As a part of the application process (see question 5) employers **must** show evidence of organisational status — ideally this will be a Certificate of Registration with the Companies Office, or other evidence of charitable status, such as evidence of Registration with the Charities Commission.

Employees (please read with care and attention)

As a part of the application process (see questions 28 and 30), employees (i.e. students) must provide proof of birth and proof of citizenship and/or residency — your application cannot be processed without this information. This evidence can be provided by your: birth certificate; passport; certificate of citizenship or residency; refugee documentation; or a letter from the New Zealand Immigration Service. If your name is different to the one on your birth certificate or passport you will need to provide additional documentation (e.g. marriage certificate) to provide the link to the name you are currently using.

Please note that for evidence of birth and citizenship or residency we need to see the original document, or a certified copy of the original. An uncertified photocopy of an original is **not** sufficient. If requested we will return original documents to you by courier. Photocopies can be provided if certified by an authorised person such as a Ministry of Social Development (MSD) staff member, a school principal or a Justice of the Peace, who has seen the original. They must print their name and title on the copy, write that it is a 'true and accurate copy' and sign the document. The copy you supply must have the original certifying signature on it, not a photocopy.

Please attach your curriculum vitae (CV), copies of any qualification certificates and your latest study results/transcript. If you have provisional or full social work registration, please provide evidence as part of your application.

Applicants will need to consent to a check of:

- MSD records to ensure that there are no outstanding issues of concern in any of their current or prior dealings with the Ministry (see applicant declaration).
- Police records by Family and Community Services to assess whether award recipients are likely to meet the "fit and proper" requirements for social work registration (complete attachment 1).

Applications close on the first Friday in October each year

Applications must be made using the application form.

Application forms can be downloaded at www.familyservices.govt.nz. Forms will also be available at the pre-application workshops, from Family and Community Services' regional offices and from all Schools of Social Work. We will also send you application forms if you phone free on 0508 346 376.

The responsibility is with applicants to ensure their application is fully completed. Applications may be returned if incomplete. Please use the checklist at the back of this form to assist you.

Send applications to: The Administrator

NGO Social Work Study Awards Family and Community Services

PO Box 1556 Wellington

Selections will be made by the end of November each year. Applicants will be advised in writing of the outcome in early December, with letters of offer and contract documentation sent to successful applicants.

Further information

If you have questions please look at the information on our website — www.familyservices.govt.nz, or phone free 0508 346 376.

NGO SOCIAL WORK STUDY AWARDS SELECTION CHECKLIST

Before starting this application, the NGO employer should use the checklist below to ensure that the application is likely to meet the selection criteria (please see the Applicant Information Booklet for the selection criteria). If it seems likely that the application will not meet the selection criteria as indicated by the checklist below, it is less likely your application will be successful.

If you are in doubt whether to proceed, please phone free 0508 346 376 to discuss.

		Response (Please circle if criteria is met)
NGC	employer	
1	Is a "not-for-profit" NGO with a government contract(s) (i.e. This means a Community and Voluntary Organisation (or similar), most likely registered as an Incorporated Society — however could be registered as a charity with the Charities Commission, or recognised as a charity by IRD)?	YES
2	Delivers social work services to vulnerable children and families?	YES
NGC	employee	
3	Is a New Zealand citizen or permanent resident (see applicant notes on page 1)?	YES
4	Is a practising social worker, or responsible for supervising the work of practising social workers?	YES
5	Is employed by an NGO on a full-time permanent or ongoing basis (i.e. is employed and paid for 20+ hours per week)?	YES
6	Already holds a qualification that meets the educational requirements of social work registration, or is already fully registered?	NO
7	Is enrolled or intending to enrol in a social work qualification that meets the educational requirements of social work registration?	YES
8	Has a conviction, in New Zealand or overseas, for an offence that is punishable by imprisonment for three months or more; or an offence where the nature and circumstances of the offence reflect adversely on a person's ability to practice social work?	NO
9	Has charges pending, or awaiting sentencing in New Zealand or overseas, for an offence that is punishable by imprisonment for three months or more; or for an offence where the nature and circumstances of the offence reflect adversely on a person's ability to practice social work?	NO
10	Is of good character with moral and ethical strength, including integrity, candour, honesty and trustworthiness?	YES

EMPLOYER APPLICATION

(EMPLOYER TO COMPLETE)

Organisational information

We need information from your organisation that identifies you, gives us information that we can use to contact you, and tells us to whom we would pay employer payments if this application is successful.

Q1.	Name of employer (Name that the employer organisation is generally known as.)
Q2.	Employer's address
Q3.	Employer's phone number (The number that MSD can use to contact the employer organisation.)
Q4.	Employer's email (The e-mail address that MSD can use to contact the employer organisation.)
Q5.	Legal name of the employer (The legal name of the entity to whom payments are to be made. You must provide a copy of your Certificate of Registration with the Companies Office or other evidence of charitable status, such as evidence of registration with the Charities Commission.)
Pa	yment information
Plea	se tell us to whom we will be paying the Student Support and Final Placement Payments (i.e. the payee). se advise if payment is to be made to the employer as detailed above, or to the same organisation but to ferent location, such as to a regional or national office. This information is required from all applicants.
Q6.	MSD Provider Number
	(Please provide your MSD Provider Number if you already have payment arrangements with MSD — this includes the Family and Community Services (FACS), Work and Income, or Child, Youth and Family (CYF) service lines. If you have a FACS or CYF contract and enter your provider number here please proceed directly to question 11.)
	ne payee information is different to that provided in Questions 2, 3 and 4 above, please vide the following additional information
Q7.	Name and postal address of employer (Business address of the organisation to which payments will be made.)

Q8.	Phone number of employer			
Q9.	Email address of employer			
	Г number n must provide this information if you do not have a FACS or CYF Provider Number.)			
Q10.	GST number of payee (GST number of the NGO organisation to which payments will be made.)			

Bank account deposit slip

If you do not have a FACS or CYF Provider Number You **must** provide an original bank account deposit slip for the account to which payments will be made if your application is successful.

SUPPORTING INFORMATION

Q11.	What Government contract(s) does your organisation hold? (Name of contract funder and general description of services funded. Please provide evidence of these arrangements, such as a letter from the funder or relevant pages from a contract, etc. If you hold contracts with MSD (i.e. Work and Income, CYF, FACS or MYD) or if you hold specific approvals, such as
	CYF 396 or 403 approval, please state and provide evidence.)
Q12.	What service(s) does your organisation provide/deliver? (Detailed description of services with particular reference to the delivery of social services to support vulnerable children and their families, including early intervention/prevention services.)
Q13.	Briefly outline your organisation's history and record of working with Maori and Pacific peoples and other ethnic communities. (i.e. Do you currently provide services to these communities and, if so, what is the nature of the services
	provided, and over what period of time have you delivered these services?)
Q14.	Please describe how this study award would help/support your organisation.
Ω15	Employee's name.
Q13.	(i.e. The name of the employee being supported by your organisation in this study award application.)
Q16.	Title of position held by the employee.
Q17.	Briefly describe the employee's duties and responsibilities. (Provide a copy of the Job Description/List of Duties, if available.)

Q18.	Q18. What is the nature of the position held by the employee? (i.e. Is this full-time, and a permanent or fixed-term appointment? Please indicate.)					
	Permanent	Not permanent (i.e. Fixed-term/Ca	asual/Contract, etc.)			
Q19.	Number of paid hours of employment per week.					
		dditional explanations or comments about t				
Q20.		yee was appointed to this position?				
Q21.	Outline/describe the emplo considered for this study av	yee's strengths and personal attributes	in support of them being			
Q22.	Organisational endorsemen particular applicant.	t — briefly state why your organisation	has chosen to support this			
Q23.	the duration of their study.	organisation will provide the employed				
Q24.	Name of nominating manag	er/supervisor.				
		•••••				
	Signature		Date			
	•••••		••••••			
	Phone	Email:				

NOTE: Have you provided your Certificate of Registration or other evidence of charitable status, your GST number, and a copy of your bank account deposit slip if required?

EMPLOYEE APPLICATION

(EMPLOYEE APPLICANT TO COMPLETE)

Personal information

Q25.	Surname/family name.
Q26.	First name:
	(In full, include any preferred name.)
Q27.	Middle name(s):
Q28.	. Date of birth:
Q29.	Have you at any time used other names? If so, please provide details.
	Surname/family name:
	First name:
	E: If your name in Q25 and Q26 is different to the name on your "proof of identity" documentation applicant notes on page 1) please provide linkage to you current name.
Q30.	Citizenship status: (i.e. NZ Citizen or NZ Resident — if a NZ Resident please state the date that residency was granted.)
	(NOTE: You must provide proof of birth and proof of citizenship in support of this response — see applicant notes at the beginning of this application form.)
Q31.	Gender:
Q32.	Ethnicity (Optional.):
Q33.	Postal address (The address to where MSD can send correspondence to you.)

Q34.	Contact details (The numbers and email address where MSD can contact you.)			
	Private			
	Fax			
	Business			
	Email			
	Mobile			
Q35.	•	urrently in receipt of a benefit, or any other payment from the f Social Development (MSD)?		
	Yes	No		
	Work and I	ncome Client Number		
	(NOTE: You	must answer question 35 and provide your Work and Income Client Number if you have one.)		

Employment history

Q36. Please outline your most recent employment history (i.e. over the last 5 years), beginning with current or latest employment

If you have provisional or full social worker registration please provide evidence.

Start date	Finish date	Employer's name	Position held	Reason for leaving

NOTE: Please enclose your curriculum vitae, and evidence of social worker registration if you have provisional or full registration.

Volunteer experience

37. Please outline any volunteer history, beginning with current or latest experience

Period	Employer's name	Nature of work/position held	Reason for leaving

Educational qualifications

If you have:

Completed any tertiary level (NZQA Level 4 and above) study, and are not currently studying, please complete Q38 only — if you are also currently studying please complete Q39 as well.

Commenced but not completed tertiary-level (NZQA Level 4 and above) study — please complete Q39 only.

For all competed or partially completed tertiary-level qualifications it is essential that you attach copies of any qualification certificates, or your latest study results/transcripts, as appropriate.

Q38. Completed tertiary qualifications

(Please state any tertiary level qualification(s): NZQA Level 4 — certificate level and above you have **completed**, including the name of the programme, the education provider and the year completed. Please provide supporting evidence of completion, such as a certificate or final results/transcripts.)

Qualification	NZQA level	Education provider	Year
e.g. Bachelor of Social Work	Level 7	Massey University	1985

Q39. Partially completed tertiary qualifications and/or details of current study

(Please state any tertiary level (NZQA Level 4 and above) credits/points you have passed as a part of a programme of study, including the name of the programme, the education provider, the year undertaken and the credits achieved. Please provide a copy of your academic results. For students who are currently studying — please provide this information and your academic results.

Qualification	NZQA level	No. of points / credits achieved	Education provider	Year
e.g. Bachelor of Social Work	Level 7	15 credits	CPIT	1985

NOTE: Have you provided proof of birth and proof of citizenship (see applicant notes on page 1), your curriculum vitae and copies of any qualification certificates? For all competed or partially completed tertiary-level qualifications, it is essential that you attach copies of all qualification certificates, and/or your latest study results/transcripts, as appropriate.

Proposed social work course of study

Q40. Which social work qualification do you intend to complete? (Refer to the SWRB website — swrb.govt.nz — for recognized SW qualifications.)

Qualification	NZQA level	Education provider
e.g. Bachelor of Social Work	Level 7	Massey University

NOTE: You must show your eligibility for social worker registration if you are intending to undertake level 6 study.

Study programme (coming academic year)

Q41. What is your proposed programme of study for the coming academic year? (Number of points, papers, credits etc that you plan to undertake in your next year of study)

Paper/module name	Points/credits	Semester 1 or 2
Total		NA
Total		AVI

	e start date for the coming academic year oximate course start date for you for the coming aca	demic year.)			
Indicative	e study programme beyond the coming acade	mic vear			
	er to Applicant Information Booklet.)	,			
(Your	is your anticipated future study-load beyond the fo best guess as to the number of points/credits you an ear detailed above in Q41.)				
Year	Number of papers you plan to undertake	Total of the points/credits planned			
(The F your F	rement ich month and year do you anticipate starting your Final Placement refers to your 60 day external placen Final Placement please provide date and details of yo ertain please give your best estimate.)	nent. If you have already undertaken			
Qualificat	tion completion				
	do you anticipate completing your qualification? nust complete this. If uncertain please give your best	t estimate.)			
••••					
(Most to find	When does your education provider require that you complete this qualification? (Most education providers have a finite time within which qualifications must be completed. You need to find out when this is for you and your qualification and to record this here — you must provide this information.)				

Supporting information

Q46.	Briefly outline your history and record of working with Maori and Pacific peoples and other ethnic communities.
Q47.	Outline why you believe that you will be successful in this proposed programme of study? (What leads you to believe that you will be successful — outline/describe factors such as your motivation, your support to study, previous study experiences and results?)
	•••••••••••••••••••••••••••••••••••••••
Q48.	Please describe/outline how the qualification you are seeking support for will enhance your career aspirations.
	(Outline/describe factors such as your professional development, future roles that you aspire to, your commitment to social work, your commitment to your community.)
04	
Stu	dy support
Q49.	Describe the type and level of support you need from your employer if your application is successful. (Assistance from your employer to support you to study or assistance to manage your workload.)
Q50.	Do you have additional funding to help support your planned study? (Do you have access to other funding such as scholarships or study awards to assist with study costs? This includes any Work and Income support towards study.)
	Yes No
	If yes, please provide further details

APPLICANTS' DECLARATION

Employee

- I consent to the following checks:
 - criminal history checks by the New Zealand Police or the Ministry of Justice
 - 'benefit history' check by the Ministry of Social Development
 - 'CYF history' check by the Ministry of Social Development.
- I consent to the Ministry of Social Development accessing study details held by my previous, current or a future education provider to help assess my eligibility for a study award. This includes the provision of study results on an ongoing basis to help in determining the fee payments that should be made as a part of this Study Award.

Employer and employee

- We have read and understood our obligations as set out in this application.
- We certify that the information we have supplied in this application is true and correct. We understand that if we have supplied incorrect or misleading information, or have omitted any important information, we may be disqualified from receiving a study award, may have the award terminated and may have to repay any money already paid.
- We understand that the granting of a study award is conditional upon the:
 - employee successfully enrolling in a course of study meeting the educational requirements for social worker registration
 - employee satisfying Ministry of Social Development that they are a 'fit and proper person' to practise social work within the meaning of the Social Workers Registration Act
 - employer and the employee having no outstanding issues of concern relating to any of their current or previous dealings with Ministry of Social Development or arising from information held by Ministry of Social Development which would, in this organisation's view, make it inappropriate to support them with a study award
 - employer and the employee signing the Agreement offered by Family and Community Services.
- We understand that the decision to offer a study award is at the discretion of Family and Community Services and that no correspondence will be entered into.

Signatures Employer: Employee:

Date ______ Date

Privacy Act 1993 Under the terms of the Privacy Act 1993 you need to know that:

- Provision of information requested by the Ministry of Social Development in this application is not compulsory, but applications may be declined if not provided as requested.
- The information will be held by the Ministry of Social Development.
- Information provided in this application may be compared to that held by the Ministry of Education and the Tertiary Education Commission, in accordance with the Information Matching provisions of the Privacy Act 1993.
- Information provided by you to MSD or Study Link may be compared to other information you have provided to them in relation to your Student Allowance and Student Loan applications.
- The information you give us will be held and used for the functions and purposes of the Ministry of Social Development including:
 - assessing the suitability of an applicant for a NGO Social Work Study Award
 - administration and assessment of a NGO Social Work Study Award
 - statistical and research purposes, including advice to Government.

NGO SOCIAL WORK STUDY AWARDS CHECKLIST

Before completing this application, the NGO employer should check that ALL required information is provided. If information is missing, this application may not be able to be assessed, and so may not be considered. You cannot rely on FACS to return these applications for completion. If you are in doubt whether to proceed or not please free phone 0508 346 376 to discuss.

NGO e	nployer	Response
1	Screening criteria checklist completed (page 2)	кезропас
2		
	Name of organisation to whom payments will be made (Q1 or Q7)	
3	Certificate of Registration/evidence of charitable status attached (Q5)	
4	GST number of organisation to whom payment will be made provided, or FACS or CYF Provider number provided (Q10)	
5	Bank account deposit slip, or FACS or CYF Provider Number provided (page 4)	
6	Evidence of contractual arrangements attached (Q11)	
7	Employer applicant declaration (page 16) signed	
Studer	t	Response
1	Proof of birth (Q28)	
2	Proof of citizenship (Q30)	
3	Work and Income client number provided if you have one (Q35)	
4	CV attached (Q36)	
5	Evidence of academic achievement (Qs 38–39)	
6	Evidence of eligibility for registration if a level 6 applicant only (Q40)	
7	Proof of registration if holding provisional or full social work registration (Q36)	
8	Full study programme provided (Q41 and Q43)	
9	Final Placement information (Q44) provided	
10	Qualification completion date (Q45) provided	
11	Study funding support question answered (Q50)	
12	Consent to disclosure of information completed, signed and dated (attachment 1)	
13	Employee applicant declaration (page 16) signed	
		1

ATTACHMENT ONE

CONSENT TO DISCLOSURE OF INFORMATION

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

(6)				
(Surna	ame)	(Forer	names)	
Sex (M/F)		••••		
(Maiden or any other names used)				
Date and place of birth				
Nationality				
Residential address				
Suburb				
City				
NZ Driver Licence number		•••••		,
I hereby consent to the disclosure this application, to the Ministry of I might have will automatically be Criminal Records (Clean Slate) Act	Social Developmen concealed if I meet	t. I understand that	any record of crimin	nal convictions
Signature		•••••	Date	•••••
Comments by the Nev	v Zealand Po	lice		