

Application for Certificate of Competence (by holder of certificate of competence under former regulations)

This application form is for use by applicants for certificates of competence who are current holders of certificates of competence under the Health and Safety in Employment (Mining Administration) Regulations 1996 (referred to in this form as “the former regulations”).

Additional unit standards in 2015

Current holders of certificate of competence under the former regulations are required under the Health and Safety in Employment (Mining Operations and Quarrying Operations) Regulations 2013 to achieve additional unit standards to obtain a current certificate of competence.

Step 1: Applicant’s Details Please send certificate to my home address

First Name	Middle Name	Last Name	
Your Home Address			Date of Birth ____/____/____
Home Phone	Mobile	Email Address	
Sign here		Date ____/____/ 2015	

Step 2: Employer Details Please send certificate to my employer’s address

Name of Employer	
Employer Courier Address (Please do not specify a PO Box unless you can receive packages in it)	
Work Phone	Work Fax

Step 3: What Certificate(s) of Competence are you applying for?:

Current certificate(s) of competence held

CoC Type	Certificate Number	Expiry Date on Certificate
<input type="checkbox"/> First-class mine manager		___/___/___
<input type="checkbox"/> First-class coal mine manager		___/___/___
<input type="checkbox"/> A-grade opencast coal mine manager		___/___/___
<input type="checkbox"/> B-grade opencast coal mine manager		___/___/___
<input type="checkbox"/> A-grade quarry manager		___/___/___
<input type="checkbox"/> B-grade quarry manager		___/___/___
<input type="checkbox"/> A-grade tunnel manager		___/___/___
<input type="checkbox"/> B-grade tunnel manager		___/___/___
<input type="checkbox"/> Coal mine deputy		___/___/___
<input type="checkbox"/> Coal mine interviewer		___/___/___

Step 4: Payment

In accordance with the fees set out in Schedule 2 of the Health and Safety in Employment (Mining Operations and Quarrying Operations) Regulations 2013, an application for a certificate of competence is to be accompanied by fee shown below:

Certificate	Fee
Issue of certificate of competence	\$ 140.00

All fees are GST inclusive. Please tick if a GST receipt is required

Please indicate how you will make payment for this CoC:

- Cheque enclosed. Please make cheques out to MITO
- Payment by internet banking to account number 06-0513-0122089-00. Please use your name and 'CoC' as the reference to appear on MITO's bank statement

Date payment made: ___/___/___ Amount: \$ _____

- Payment by credit card. Please complete the details below:

Card type: Visa MasterCard

Name: _____

Contact Phone: _____ Credit Card Expiry: ___ / ___

Credit Card Number:

Signature: _____ Amount: \$ _____

Step 6: Checklist

Please check that you have completed and understand the following:

Unit Standards

I have completed the required Unit Standards

First Aid Certificate

I have enclosed a copy of my current first aid certificate

Your Details

I have completed all the details on page 1

Fees

I have completed payment information on Page 2.

Fit and Proper person

I have completed the fit and proper person form

For any queries please contact MITO: Freephone 0800 88 21 21 email: info@mito.org.nz

Please return the completed form and attachments to: certificates@mito.org.nz

or

MITO, PO Box 10803, The Terrace, Wellington 6143

Appendix A)

Fit and Proper Person Form

ABOUT THIS FORM

To hold a Certificate of Competence under the Health and Safety in Employment (Mining Operations and Quarrying Operations) Regulations 2013 you are required to be a fit and proper person.

You as the applicant must complete, sign and date this form no more than three months before we receive it. You must complete this form correctly for your application to be valid.

WHERE TO SEND YOUR COMPLETED FORM:

This form must be attached to your Certificate of Competence application form.

1. PERSONAL DETAILS

Please complete all of these fields.

Surname	<input type="text"/>
Given name(s)	<input type="text"/>
Other names used	<input type="text"/>
Nationality	<input type="text"/>
Place of birth	<input type="text"/>
Give the city and country	
Date of birth	<input type="text"/>
	DD / MM / YYYY
Home phone	<input type="text"/>
	Eg +64 1 234-5678
Mobile phone	<input type="text"/>
	Eg +21 123-4567
Fax number	<input type="text"/>
	Eg +64 1 234-6789
Email Address	<input type="text"/>
Residential Address	<input type="text"/>
	<input type="text"/>
	<input type="text"/>
Post code	<input type="text"/>
Postal Address	<input type="text"/>
Fill in this section if different from residential address:	<input type="text"/>
	<input type="text"/>
	<input type="text"/>
Post code	<input type="text"/>

Change of Name – only complete if applicable

<p><i>If your name has changed for any reason, please provide a copy of one of the following items (as relevant). Please tick included item.</i></p>	<input type="checkbox"/> Marriage Certificate <input type="checkbox"/> Statutory declaration <input type="checkbox"/> Deed poll <input type="checkbox"/> Civil union certificate	<input type="checkbox"/> Certificate of annulment <input type="checkbox"/> Divorce papers <input type="checkbox"/> Other similar proof of name change
---	---	---

Confirmation of Identity

<p><i>Please enclose a COPY of one of the following items to confirm your identity. The copy must be of a current (unexpired) document. Please tick the included item.</i></p>	<input type="checkbox"/> A New Zealand Driver Licence <input type="checkbox"/> A full birth certificate <input type="checkbox"/> A certificate of New Zealand Citizenship <input type="checkbox"/> A current refugee travel document used by or on behalf of the government of New Zealand	<input type="checkbox"/> A New Zealand or overseas passport <input type="checkbox"/> A New Zealand firearms licence <input type="checkbox"/> A current certificate of identity <input type="checkbox"/> A New Zealand Police or New Zealand Defence Force photo identity card issued to non-civilian staff
--	---	---

2. PURPOSE OF YOUR APPLICATION

Which Certificate of Competence are you applying for?

Site senior executive	
First class mine manager	
First class coal mine manager	
A-grade opencast coal mine manager	
B-grade opencast coal mine manager	
A-grade quarry manager	
B-grade quarry manager	
A-grade tunnel manager	
B-grade tunnel manager	
Coal mine underviewer	
Coal mine deputy	
Supervisor	
Electrical superintendent	
Mechanical superintendent	

Mine surveyor

Ventilation officer

Winding engine driver

3. MANDATORY QUESTIONS

The following information is collected for the purposes of regulation 38 of the Health and Safety in Employment (Mining Operations and Quarrying Operations) Regulations 2013, which requires an applicant for a certificate of competence to be a fit and proper person to hold that Certificate of Competence.

Note that you may be eligible under the Criminal Records (Clean Slate) Act 2004 to state that you have no criminal record even if you do have convictions. For more information please refer to the Ministry of Justice Website.

Each application will be considered on its individual merits. When assessing whether an applicant is a fit and proper person, the New Zealand Mining Board of Examiners will take into account any matters it considers relevant, particularly the information provided below.

Answer the following questions by ticking the box that applies to you.

		Yes	/	No
1	Have you ever been convicted (in any country) in any court of law for any offence relating to health and safety?	<input type="checkbox"/>		<input type="checkbox"/>
2	Have you ever been convicted (in any country) in any court of law for any offence relating to controlled drugs (as defined in the Misuse of Drugs Act 1975) or relating to any prescription medicine (as defined in the Medicines Act 1981)?	<input type="checkbox"/>		<input type="checkbox"/>
3	Have you ever been convicted (in any country) in any court of law for any offence involving violence or causing danger to any person, or criminal damage?	<input type="checkbox"/>		<input type="checkbox"/>
4	Have you had any document, or certificate of competence (or other similar license or document) suspended, cancelled or revoked (in any country)?	<input type="checkbox"/>		<input type="checkbox"/>
5	Have you (in any country) previously had an application for a document or certificate of competence rejected?	<input type="checkbox"/>		<input type="checkbox"/>
6	Have you been convicted for any criminal offence (in any country)?	<input type="checkbox"/>		<input type="checkbox"/>
7	Are you presently facing charges for any offences (in any country)?	<input type="checkbox"/>		<input type="checkbox"/>
8	Is there any other information that is relevant to your application that has not been addressed in the questions above?	<input type="checkbox"/>		<input type="checkbox"/>

5. CONSENT

Consent to disclosure and collection of personal information

I authorise the collection by the Motor Industry Training Organisation Incorporated (MITO) (for the New Zealand Mining Board of Examiners) and the disclosure to MITO (on behalf of the New Zealand Mining Board of Examiners) by any person, organisation or government department in any country of any details of the following information about me: my knowledge and compliance with the health and safety regulatory requirements; any criminal investigations, charges or convictions, including any matters relating to any health and safety offences and any regulatory actions including the suspensions, revocation or refusal to issue a licence or certificate of competency.

However, I do not consent to the release of any information to which the 'clean slate' scheme applies, pursuant to the Criminal Records (Clean Slate) Act 2004.

I authorise the New Zealand Mining Board of Examiners to use, and disclose, the information obtained about me for the purposes of determining my eligibility to be issued, and to hold, a certificate of competence under the Health and Safety in Employment (Mining Operations and Quarrying Operations) Regulations 2013.

Your signature

Date

DD / MM / YYYY

6. PRIVACY STATEMENT

This information is being collected for the purposes of determining your eligibility to be issued, and to hold, a certificate of competence under the Health and Safety in Employment (Mining Operations and Quarrying Operations) Regulations 2013. The intended recipient of the information is the New Zealand Mining Board of Examiners.

This information is being collected by MITO, (Level 10, 79 Boulcott Street, PO Box 10803, Wellington 6143) and will be held by MITO on behalf of WorkSafe New Zealand for the New Zealand Mining Board of Examiners. The address of WorkSafe New Zealand is:

*PO Box 165
Wellington, 6140*

This information is being collected under regulation 37 of the Health and Safety in Employment (Mining Operations and Quarrying Operations) Regulations 2013. If you fail to provide the information sought it may result in your application for a certificate of competence being refused.

You have the right to access, and request correction of, any personal information about you held by WorkSafe New Zealand (including the information provided on this form).

7. DECLARATION

Your signature

Date

DD / MM / YYYY

By ticking this box, you (the above named person) declare that to the best of your knowledge and belief the statements made and the information supplied in this form and the attachments are true, complete and correct.