OFFICE USE ONLY	

Part 1: PERSONAL AND CONTACT DETAILS

Surname:				
First name/s:				
Date of birth: / /	Application number:			
CONTACT DETAILS				
Mailing address:				
	Postcode:			
Phone number:				
Email:				
Part 2: FEES AND REMITTANCE ADVICE				
Fee: \$255.55				
Please invoice my employer (an invoice will be emailed directly to you)				
I enclose cheque / bank cheque for the sum of NZ \$255.55 including GST				
Please debit my MasterCard / Visa for the sum of NZ \$255.55 including GST				
CREDIT CARD NUMBER:				
Expiry date: /				
Name on card:				
Signature:	Date: / /			
I have paid by direct credit / internet banking with my initials and surname as the reference and COMP as the				
code. (Please note that not including the reference and code may delay your application being processed).				
Social Workers Registration Board Bank Account Number: ANZ Bank: 06 0507 0040722 00 Payment Date:				

Part 3: DECLARATIONS 2018/2019

All sections must be completed

APPLICANT DECLARATION – The applicant completes this

l,
declare that I am competent to practice social work in accordance with the Social Workers Registration Board's ten core competence standards. I affirm that I have undertaken/will continue to undertake a range of professional development activities and have/will have evidence of this in my Continuing Professional Development log. I confirm the enclosed application to be an honest and true reflection of my practice.
Have you been the subject of a disciplinary investigation / complaint investigation in the past five years?
Yes – write to the SWRB Registrar explaining the circumstances and enclose in a sealed envelope with your application
No Are you currently the subject of a disciplinary investigation / complaint investigation?
Yes – write to the SWRB Registrar explaining the circumstances and enclose in a sealed envelope with your application
□ No Workplace:
Signature: Date:
MANAGER/SUPERVISOR EVALUATION DECLARATION
The manager/supervisor to whom the applicant reports completes this
I believe the applicant to be COMPETENT against the Social Workers Registration Board's ten core competence standards.
Supervisor/Manager full name:
Registration number (if applicable):
Workplace:
Job title:
Signature: Date:
STATEMENT OF ENDORSEMENT
A New Zealand Registered Social Worker or qualified social worker (this different to the manager/supervisor signature above)
I have observed the social work practice of the applicant and endorse the Supervisor/Manager recommendation that the applicant is COMPETENT against the Social Workers Registration Board's ten core competence standards.
Endorser's full name:
SWRB registration number:
Qualification:
Workplace:
Job title:
Signaturo