**CONFIDENTIAL CHARACTER REFERENCE**

**FOR APPLICANT FOR REGISTRATION AS A SOCIAL WORKER**

Please answer the questions as fully and candidly as possible, the text boxes will expand as you write. If necessary, please continue your answers on a separate sheet and attach to this reference.

If you are *unable* or *unwilling* to answer any question, please indicate that in your response.

1. **Applicant Name**: Click here to enter text.
2. **Applicant Date of Birth:** Click here to enter a date.
3. **Referee details**

*Referee must be a “person of standing in the community” and have known the applicant for at least* ***2 years****. For guidance on who is a person of standing please see below “Information for Referees”.*

Referee name: Click here to enter text.

Position / title: Click here to enter text.

Employer: Click here to enter text.

Qualifications: Click here to enter text.

Professional Memberships/Registrations: *please provide name and registration number*: Click here to enter text.

Phone: Click here to enter text.Email: Click here to enter text.

Is the applicant related to you by blood, marriage, civil union or de facto relationship?

Yes [ ]  No [ ]

**For how long and in what capacity do you know the applicant?**

Click here to enter text.

1. **The applicant’s character**

What is your assessment of the applicant’s character, integrity, reliability and honesty?

Click here to enter text.

Are there any personal or professional issues the Board should be aware of that may affect the applicant’s ability or suitability to practise social work?

No [ ]  Yes [ ]  *If yes, please provide further details.*

Click here to enter text.

Do you have any further comments about the applicant’s character?

Click here to enter text.

1. **The Applicant’s fitness to practise social work**

To your knowledge, does the applicant currently have any physical or mental health condition (including substance abuse) that in your opinion may affect his or her ability to perform the functions necessary to satisfactorily perform social work?

To your knowledge has the applicant received medical treatment for any physical or mental health condition at any time in New Zealand or overseas which might reflect adversely on his or her physical or mental fitness to practise as a social worker?

No [ ]  Yes [ ]  *If yes to either of the above questions please provide further details.*

Click here to enter text.

To the best of your knowledge has the candidate:

* Even been convicted in any criminal court in New Zealand or overseas?
* Pending or current charges before a criminal court in New Zealand or overseas?

No [ ]  Yes [ ]  *If yes, please provide further details.*

Click here to enter text.

To your knowledge, has the applicant ever been the subject of a disciplinary investigation or action by any regulatory or licensing authority in New Zealand or overseas?

No [ ]  Yes [ ]  *If yes, please provide further details.*

Click here to enter text.

Do you consider the applicant to bea fit and proper person to be registered as a social worker? Why or why not?

Click here to enter text.

1. **Declaration**

I declare that I am the person named as the applicant’s referee and that the information I have provided in this reference is true and correct to the best of my knowledge.

Referee signature if sending via post: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

***If sending via email, your email will be accepted as and electronic signature***

Date: Click here to enter a date.

**Information for Referees**

**Who cannot be a referee?**

* Family member or whanau (including spouse, partner, in-law).
* Resides at the same address as the applicant.
* The spouse or partner of someone who has already provided a reference.

**Person of Standing**

The reference must be provided from a person of standing within the community this includes:

* Members of a regulated profession (for example, a lawyer, doctor, chartered accountant, nurse, teacher, financial advisor, engineer, pilot, real estate agent, social worker) who is licensed to practise;
* University lecturers or professors;
* Justices of the Peace;
* Elders or pastors from a church, temple or synagogue or other religious official;
* Service police officers or members of the armed forces;
* Senior government officials or Members of Parliament.

**Use of Reference**

The information and opinion you provide will be treated as confidential to the Social Workers Registration Board. It will be used by the Social Workers Registration Board for the purpose of assessing the applicant’s character and to ensure the applicant is a fit and proper person to be registered as a social worker. It will not be disclosed or made public other than as required or permitted by law.

 **Submission of Reference**

Please provide the **original** signed copy of your reference directly to the Social Workers Registration Board:

 Social Workers Registration Board

 PO Box 3452

Wellington 6240

Email: applications@swrb.govt.nz

Phone: 0508 797 269