

Pre-employment check - request for ACC claims history



Please Read: Please complete this form and then email it to preemploymentchecks@acc.co.nz. Please provide a valid proof of identification: These include but are not limited to; Driver's Licence, Passport, 18+ Card, Birth Certificate, or Statutory Declaration signed by the Police or JP.

Employers and recruitment agencies: unless the job applicant gives specific permission, the claims history provided will not include information about any:

- mental injury as a consequence of physical injury claims
- · declined claims including accredited employer claims
- · treatment injury claims
- · claims occurring more than 10 years ago

- sensitive claims
- wilfully self-inflicted claims
- · accidental death claim dependants

PART A: IDENTIFYING DETAILS

1. JOB APPLICANT'S DETAILS	PLEASE COMPLETE ALL SECTIONS	
First Name:	Middle Name:	
Surname:	Also known as (e.g Maiden name):	
Date of Birth:	Phone Number/s:	
Ethnicity:	Male Female	
Postal address:	Suburb:	
Town/City:	Postal Code :	
Previous Address:	Type of work/Industry:	

2. EMPLOYER OR RECRUITMENT AGENCY	FOR ACC CLAIMS HISTORY RESULTS TO BE SENT TO	
Organisation Name:	Contact Person's Name:	
Contact Phone Number:	Contact Email Address:	

PART B: CONSENT FOR ACC TO RELEASE INFORMATION

3. JOB APPLICANT'S CONSENT AND SIGNATURE

I authorise ACC to release my ACC claims history to the employer or recruitment agency named in Part A:2, and understand that I will be sent a copy to the mailing address marked in Part A:1.

I understand that this information will only be used to decide whether I can carry out the job safely.

I understand I have the right:

- to see and correct this information under the Privacy Act 1993
- that the employer or recruitment agency will use this information responsibly, and comply with the Privacy Act 1993, Health Information Privacy Code 1994 and the Human Rights Act 1993
- that the employer or recruitment agency will destroy the information once the job application process is complete.

Job applicant's signature:	Date: