

SERVICE TASMANIA OFFICE USE ONLY:

- Product code: 289
 Fee collected
 Sections 1-7 of form completed
 Declaration signed and witnessed
 Additional information attached



Application for Registration as a High Risk Work Licence Assessor (GF062)

- I apply for:
- New Registration as a High Risk Work Licence Assessor.
(Please note that the registration fee cannot be paid until final assessments are conducted by WST) Please complete **all** Sections on this form.
 - Renewal of an existing Tasmanian registration as a High Risk Work Licence Assessor.
 - Application for an additional classification/s to an existing Tasmanian registration as a High Risk Work Licence Assessor.

Note: If there is insufficient space on this form, you may attach additional papers. However, please ensure that any attachments are labelled with your name and signed by you as being true and correct.

1. PERSONAL DETAILS

Family Name: _____
Given Names: _____
Address: _____
Postcode: _____ Date of Birth: _____

2. EMPLOYMENT DETAILS

Name of Employer: _____
Position Held: _____
Business Address: _____
Postal Address: _____
Business Phone No: _____ Business Fax No: _____

3. HIGH RISK WORK LICENCE CLASS DETAILS

Details of the High Risk Work Licence class/classes for which I seek registration/renewal of registration as an assessor are as follows:

Type	Code
_____	_____
_____	_____
_____	_____

6. OTHER RELEVANT DETAILS

I am a registered industry assessor YES NO If yes, provide name and address of registering body:

I have been assessed as meeting the competency standards for industry assessors YES NO

If yes, give details: _____

7. DECLARATION (Note: Failure to make full disclosure may result in registration being cancelled)

Have you been convicted, or are you the subject of any matter under investigation, or pending a hearing:

i) for any offences under any Australian occupational health and safety legislation?

ii) for any criminal or police related offences under Australian, State, Territory or Federal Statute?

YES NO If yes, please provide details _____

Have you either:

i) been refused registration to become an assessor in any Australian State or Territory; or

ii) had your assessor registration cancelled or suspended by another State or Territory occupational health and safety regulatory authority?

YES NO If yes, please provide details. _____

I, the undersigned, do solemnly and sincerely declare that the information contained in this application is true and correct.

Signature of Applicant: _____ Date: ____/____/____

Name of Witness: _____

Signature of Witness: _____ Date: ____/____/____

8. PAYMENT METHOD

In person at any Service Tasmania shop

FEES

Application fee for New Registration or adding of an additional class/es	\$82.41
Renew registration for one class	\$439.64
Renew registration for more than one class	\$714.43

Personal information we collect from you will be used by the Director of Industry Safety for certification purposes and may be used for other purposes permitted by the *Workplace Health and Safety Act 1995* and associated laws. Failure to provide this information may result in your application being denied or records not being properly maintained. Your personal information may be disclosed to contractors and agents of Workplace Standards, law enforcement agencies, courts and other public sector bodies or organisations authorised to collect it. This information will be managed in accordance with the *Personal Information Protection Act 2004* and may be accessed by you on request to this Department. You may be charged a fee for this service.