

Information request to Oranga Tamariki

Dat	e:
To:	Oranga Tamariki or name of specific staff member:
Ema	ail: infosharing@ot.govt.nz
<u>1.</u>	Your details
Org	anisation or business:
Nar	ne and role:
Ema	ail address:
Con	tact phone number(s) (organisation and direct dial):
Pos	tal address:
Alte	ernative contact person:
Alte	ernative contact person's phone number:
□ Fan	Request details I am a member of a family violence agency or I am a social service practitioner as defined under section 19 of the nily Violence Act 2018. I am requesting access to information you may hold in relation to the person or persons named below: ne (including aliases, previous/maiden names or also known as):
Add	lress:
DOE	3:
I an	requesting this information under section 20 of the Family Violence Act in relation to the
per	son/persons listed above to: Please tick the boxes that apply:
	help ensure that a person/persons are protected from family violence
	make or contribute to a family violence risk or need assessment
	make a decision or plan that relates or responds to, or arises from, family violence
u viol	contribute to the making or carrying out of a plan or decision that relates or responds to, or arises from, family ence

Please specify:
The reason I am requesting the information now is: What triggered your concerns? Detail your current involvement, concerns, the purpose or decision you are trying to inform. How will this information assist you in your decision making, or the activities you are undertaking?
The information I am requesting is: Outline the details of the information you need as clearly as you can. It may be helpful to request information as a series of questions.
3. Consent
Wherever possible, consent should be obtained where it is safe to do so.
s the person concerned aware that you are requesting information relating to them?
□ Yes □ No
If no, why? Explain the reason for this. Be specific about safety issues or issues that need to be considered by Oranga Tamariki when considering whether it is appropriate in the circumstances to share information without the person's, or their representative's, knowledge.

If yes, did the person or their representative consent to the information being shared?
Did the person or their representative specify any limitations on the sharing of information?
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If the persons concerned are not wanting you to gather this information, why have you decided to go ahead with the request? Have they been made aware that Oranga Tamariki will consult prior to sharing information unless that is unsafe or impractical to do so? Have they requested to have a support person present?
To enable us to seek consent from the specified person about the information we propose to disclose, please provide their contact details or the name and contact details of their representative.

4. I imeframe	
When do you need this information?	
Why is it important for you to have it by then?	
If you have any queries, wish to talk over the request, or are unable to meet the requested timeframe, please contact me on the above phone number or email address to discuss.	
Thank you for your assistance.	
Applicant signature:	