

## Plunket Parenting Through Separation Course Enrolment Form

| Course date you wish to enrol   | in | Place                           |                       |  |  |
|---|----|---------------------------------|-----------------------|--|--|
| YOUR DETAILS  |    |                                 |                       |  |  |
| First name  |    | Family name                     |                       |  |  |
| Maiden name (if applicable)   |    | Also known as (if applicable)   |                       |  |  |
| Date of birth   |    | Ethnicity                       |                       |  |  |
| Address   |    |                                 |                       |  |  |
| Daytime contact phone   |    | Email address                   |                       |  |  |
| Where did you learn about the course?   |    | Do you have a protection order? |                       |  |  |
| SEPARATING PARTNER'S INFORMATION  (We need this information to ensure you and your separating partner are NOT booked on the same course.)                     |    |                                 |                       |  |  |
| Name  |    | Date of birth                   |                       |  |  |
| Address   |    |                                 |                       |  |  |
| CHILDREN'S DETAILS  |    |                                 |                       |  |  |
| Children's names  |    |                                 | Date of birth         |  |  |
|   |    |                                 |                       |  |  |
|   |    |                                 |                       |  |  |
|   |    |                                 |                       |  |  |
|   |    |                                 |                       |  |  |
|   |    |                                 |                       |  |  |
| Do you give permission for your details and participation in this course to be entered into the Government's recording system (Resolution Management System)? |    |                                 | I agree (please tick) |  |  |
| (Note: It is mandatory for you to give permission before a course completion certificate can be issued to you)  |    |                                 |                       |  |  |
| How should we contact you, after the course to ask how useful it was for you?   |    |                                 |                       |  |  |
| What time of day is the best  |    |                                 |                       |  |  |

The information you provide in this form is being collected by the Royal NZ Plunket Society to enable you to participate in a free Parenting Through Separation Programme. The information you have provided may be used by the Ministry of Justice for the purpose of determining your completion of the course, tracking the progress of your family dispute, providing and/or managing the out of court family justice services they may provide or fund, validating accuracy of information provided or for determining whether your family dispute can proceed to court. Under the Privacy Act 1993 you have the right to have access to all information held about yourself, and to request correction of that information. To request access to, or correction of, any of your personal information collected for the above purposes, please contact: Privacy Officer, Ministry of Justice, SX 10088, WELLINGTON. Phone: 04 918 8800 Email: privacy.officer@justice.govt.nz

OFFICE USE ONLY

| Enrolment received |  | RMS ID |  |
|--------------------|--|--------|--|
|--------------------|--|--------|--|