

APPLICATION – Exemption from COVID-19 Public Health Response (Vaccination) Order 2021 (clause 12A)

Use this form to apply for an exemption for a border worker who is not vaccinated and where removing the worker from that role would result in a significant disruption to essential supply chains.

When it is complete, please email it to Covid19vaccine@transport.govt.nz

If you need to apply on behalf of more than one worker, please complete a separate form for each worker.

You are encouraged to attach supporting information.

Personal information

We will collect personal information, through PCBUs, including information about a worker's:

- name
- role
- reasons for not being vaccinated.

We collect personal information as part of the process for assessing applications for exemptions.

Besides the Ministry staff who receive and then assess applications, we will share this information only with the other government agencies (Ministry of Health; the Ministry for Business, Innovation and Employment; NZ Customs; Civil Aviation Authority and Maritime New Zealand) involved with considering exemption applications, and any relevant Minister.

If you choose not to enter responses to the questions set out in this form, it is likely we will seek further information in order to process the application.

We manage the security of our information in accordance with our privacy statement and Information Security Policy, and in compliance with the Privacy Act 1993, the Official Information Act 1982 and the Public Records Act 2005. The information we hold is used only for the purpose for which it is collected or as otherwise advised, including as described in our Privacy Statement.

You have the right to ask for a copy of any personal information we hold about you, and to ask for it to be corrected if you think it is wrong. If you'd like to ask for a copy of your information, or to have it corrected, please contact us at info@transport.govt.nz.

Link to the Ministry's privacy statement: https://www.transport.govt.nz/footer/privacy-and-transparency-statement/



EMPLOYER/PCBU INFORMATION

Organisation name:	
Contact name and title:	
Contact email and phone:	
Time period of exemption applying for:	
WORKER INFORMATION	
Worker name and title:	
Role description:	
Reason for declining vaccination:	
I agree to my PCBU applying for an	Signature
exemption under clause 12A of the COVID-19 Public Health Response	
(Vaccination) Order 2021	Pate



1) Potential for a significant supply chain disruption

Please complete the following questions to evidence the potential for a significant supply chain disruption if the worker is not able to perform their role due to not being unvaccinated.

What is the potential significant supply chain disruption that would result from the worker

being unable to perform the role?	
How significant would the supply chain disru	uption be?
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What is the risk to the public interest from the supply chain disruption, including economic impacts – that is, how will New Zealand be impacted if the worker is unable to perform	
their role?	

2) Public health risk

Please complete the following questions to describe the public health risk associated with the role by circling Yes or No (and provide supporting comments if needed).

Does the work involve the worker coming into contact with:	
 International arriving or international transiting passengers at affected^{1 i} airports? 	Y / N
Affected ships?	Y / N
Persons either in, or being transported to, managed isolation facilities/ managed quarantine facilities?	Y / N
Affected items?	Y / N
Does the worker handle goods arriving from overseas? (If yes, see below)	Y / N

¹ The Vaccination Orders provide definitions of these terms. See <u>COVID-19 Public Health Response</u> (Vaccinations) <u>Order 2021 (LI 2021/94) (as at 14 July 2021) 4 Interpretation – New Zealand Legislation and <u>COVID-19 Public Health Response</u> (Vaccinations) <u>Amendment Order 2021 (LI 2021/182) – New Zealand Legislation</u></u>



If you answered yes, please describe the interactions/handling and what public health measures are in place to mitigate the risk:	

3) Impact on your business

Please complete the following questions by circling Yes or No (and provide supporting comments if needed) to evidence that you have exhausted options to redeploy the worker and/or retrain existing/recruit new staff to replace them in the short term.

Can the worker be replaced with another worker, by another function, or by training other/new staff in the short term?	Y / N
Can the worker's activities reasonably be delayed to facilitate vaccination of the worker needed to perform the role?	Y / N
Can you operate without the role while retraining or recruitment is underway? (If no, see below)	Y / N



If you answered no, please provide supporting information and describe the qualifications and training required to fill the role and how long training or recruitment will take:	

Please note that exemptions will be limited to a specific period of time.

4) Efforts to support the worker's vaccination

Please complete the following statements by circling Yes or No.

I have made the worker aware of their requirement to be vaccinated	Y / N
I have made the worker aware of the deadline for getting vaccinated	Y / N
I have offered the worker the opportunity to be vaccinated during their usual working hours	Y / N
The worker has been briefed on the vaccine by a suitably qualified health practitioner	Y / N



Please describe any efforts you have undertaken to address any barriers to the worker being vaccinated and/or support you've offered the worker you are applying on behalf of	
to be vaccinated.	

PCBU SIGNATURE

I, Name:	Signature
Confirm the information I have provided in this application is true and correct to the best of my knowledge	Date