



1. DETAILS OF APPLICANT

FULL NAME:

ADDRESS:

OCCUPATION:

DATE OF BIRTH: MALE FEMALE

POSTAL ADDRESS:

EMAIL ADDRESS: DAYTIME CONTACT NUMBER:

2. TYPE OF CERTIFICATE YOU ARE APPLYING FOR (tick one) GENERAL MANAGER CLUB MANAGER

3. RESPONSIBILITIES, EXPERIENCE + TRAINING

Have you had any experience or training in managing any licensed premises? YES NO

If YES, briefly state your responsibilities, experience and training. Submit any references of support.

4. CRIMINAL OFFENCES

Have you been convicted of any offence? YES NO

If YES, provide details of the offence(s):

Application for a Manager's Certificate

5. CRIMINAL BACKGROUND CHECK

Please complete and sign the attached "Consent to Disclosure of Information" Cook Islands Police form which will enable the Liquor Licensing Authority to obtain background information on you.

6. IDENTIFICATION DETAILS

Please provide 1 x clear COPY of ONE of the following documents for identification purposes.

Current Passport Current Driver's Licence

APPLICANT'S SIGNATURE: _____

DATE: _____

For Office Use Only

TEST RESULTS:

Test 1:
Test 2:

ASSESSMENT: Pass Fail

ASSESSMENT: Pass Fail

LICENCE NUMBER:

Date Licence Issued:

Date Paid:

Receipt No: