

Update Registered Assessor Details

Personal contact details:

Surname:

First names:

Preferred name:

Assessor registration number:

Please provide your new details below.

Home Contact Details: *(Required by NZQA)*

Home Address: Number and Street:

Suburb:

City:

Postcode:

Home Phone:

Home Phone:

Actioned:

QA Approved:	QA Signed:	QA Name:	Date:
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(Note: Email the form to QA@competenz.org.nz or send completed form with attachments to Quality Assurance Newmarket Office.)