

SAFETY, HEALTH AND ENVIRONMENT

ENTERPRISE-WIDE SHE TEMPLATE

COMPETENCY CHANGE FORM

Please complete this form if you wish to request the transfer of competencies from one organisation to another. Email this form to nationalpermits@kiwirail.co.nz. If an employee is simply leaving your organisation, you can email kle.help@kiwirail.co.nz to have their competencies archived in our system.

Requester's Name:		Requester's Email:	
New organisation:		Previous Organisation:	
New Supervisor's Name:		New Supervisor's Email:	
Date for competencies to be transferred by (Allow at least 10 working days):			
Name of person holding competency	Competency	Reason for transfer	
COMPETENCY TRANSFER APPROVAL (Office use only – we will facilitate within KiwiRail to obtain 2 of the following approvals).			
OSA/Zero Harm/ Protection Manager Name		Date:	
Approved (Y/N): Comments:			
OSA/Zero Harm/ Protection Manager Name		Date:	
Approved (Y/N): Comments:			
National Protection Manager Name (compulsory sign off)		Date:	
Approved (Y/N): Comments:			
NOTIFICATION AND ENTRY INTO KLE (Office use only)			
Approved	Y/N	Advised requester on (date):	
Updated in KLE by (name)			

Our KLE team will email you to confirm that the transfer has either been completed, or declined.