

APPLICATION for REGISTRATION with TESSO as a CERTIFIED TELECOMMUNICATIONS CABLER



PLEASE READ THESE TERMS AND CONDITIONS OF REGISTRATION CAREFULLY

By completing registration with TESSO you signify you have read and accept these terms and conditions. If you do not agree to these terms, do not register. The acceptance and understanding of the terms and conditions is mandatory to successful registration.

The certified cabler register is owned and operated by TESSO (Telecommunication Education & Skills Standards Organisation).

TESSO is committed to protecting your privacy. Other than your full name, registration number, category, qualifications (optional) and registration expiry TESSO will use the information collected only to ensure you can be successfully registered. You are in control of the information you provide to TESSO. TESSO will not sell, trade or rent your personal information to others, unless required to do so by law.

To ensure the accuracy and current validity of the information entered, the registrant gives full permission for the TESSO Registrar and/or their representative to check all qualifications and references contained in the information you have submitted.

Limitation of Liability

TESSO will not be liable to you or any third parties in contract, tort, equity, for breach of any statute (to the fullest extent permitted by the law) or in any other action for any loss of profits or any indirect or consequential damages of any kind arising directly or indirectly from any act, omission, breach, error, default or delay by TESSO or its employees or agents in the performance of, or in relation to this agreement and the TESSO Cabler Register.

Please return this application by mail to:

The Registrar, TESSO, P O Box 17 063, WELLINGTON

Please read and complete all pages of this form, Annex 1 provides explanatory notes to assist you.

(1) Full Name (note 1)

Surname	
First Names	
Preferred Name	

(2) Mailing Address

(3) **Contact Numbers**

	Area Code	Number
Home ph.		
Fax		
e-mail		@
Business		
Mobile		
Fax		
e-mail		@

(4) **Birth Date:** ___/___/___ (Note 2)

(5) **Employers name and Mailing Address**

(6) **Employers Contact Numbers**

	Area Code	Number
Business		
Mobile		
Fax		
e-mail		@

(7) **Attach a one-page copy of your work experience history for the last two years prior to the date of this application and indicate with a tick in which category(s) registration is sought:** (Note 3)

Tick the box for the registration you are seeking

As premise network cabler	
As customer access network cabler	

(8) **Referees** (Note 4)

Provide details of at least one referee (other than your current employer) who is prepared to verify your experience history, refer 7 above.

Referee's _____
Name Company Position

Referee's contact numbers:

	Area Code	Number
Business		
Mobile		
Fax		
e-mail		@

(9) **Declaration To Be Signed By Employer**

I certify that the information with respect to the applicants current employment in the attached work experience history (7 above) is true and accurate.

Signature Position / /
Date

(10) **Provide details of your qualifications and experience relevant to the registration category sought** (Note 5)

(10a) Premise network Cabler

Unit Standard number	Relevant unit standard titles and certification descriptions	Date accredited	Certification Expiry date	Training Provider name
17396 Note 6	"Demonstrate knowledge of safe working practices in telecommunications"		NA	
6401	"Provide first aid"			
6402	"Provide resuscitation level 2"			
20177 Note 7	"Demonstrate knowledge for telecommunications premise network cablers"		NA	
Note 8	"Site Safe Commercial Passport certification"			
Note 9	"Other" provide details in question 11 below			

(10b) Customer Access Network Cabler

Unit Standard number	Relevant unit standard titles and certification descriptions	Date accredited	Certification Expiry date	Training Provider name
17396 <i>Note 6</i>	"Demonstrate knowledge of safe working practices in telecommunications"		NA	
6401	"Provide first aid"			
6402	"Provide resuscitation level 2"			
20176 <i>Note 10</i>	"Demonstrate knowledge and skills for telecommunications customer access network cablers"		NA	
<i>Note 11</i>	"Transit NZ certification"			
<i>Note 12</i>	"Other" provide details in question 11 below			

(11) **Provide an outline of the "Other" technical Vendor and/or Company training courses you have received relevant to the registration category sought**

✓ where indicated if you do not wish "other" qualification(s) to appear on your personal registration card

Course name	Date of training	Where provided	Providers name	✓

(12) **Declaration To Be Signed By Applicant**

I certify that the information provided in this application is true and accurate.

Signature

Position

____/____/____
Date

(13) **Two-yearly Current Competency Examination**

Complete the TESSO 30-question competency test paper(s) available from www.tesso.org.nz for the relevant registration category(s) and forward with this application.

(14) **Fees**

Registration fees, payable on application, are \$45 + GST for applicants from companies that are members of TESSO, and \$55 + GST for non-members. This fee is payable every two years if you wish to remain on the TESSO register.

(15) **Check List**

Have you completed all questions and sections of this form.

Attachments tick box

Copies of qualification documentation

Work experience history for the past 2-year period

Completed 30 question test paper

Fee – tick here and provide an address if a tax invoice provided by e-mail is required

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(15) **For any questions please contact :**

A.C. (CHRIS) JONES M.IPENZ
Executive Officer TESSO
P O Box 17 063
WELLINGTON.

Telephone 04 476 9928 or mobile 021 658 953
Fax 04 476 9043
e-mail chris.jones@tesso.org.nz

ANNEX 1

Explanatory Notes to the application form questions

Note 1	Please enter your full name and your preferred name for publication on the register.
Note 2	Your birth date is required only for identification purposes and will not be published.
Note 3	The different criteria for the two categories of Cabler is indicated in question 10, applicants may choose to obtain registration in both. A minimum of 12-months relevant work experience is a mandatory requirement for registration.
Note 4	Your nominated referee will be contacted for confirmation of the details in the one-page work experience history you submit.
Note 5	Details of unit standards 17396, 20176, 20177, 6401 and 6402, and accredited training providers by region, are available from the National Qualifications Framework – www.nzqa.govt.nz click on “Search Framework” and enter unit standard number.
Note 6	The TESSO Board has agreed that the mandatory requirements for unit 17396 will be waived until your registration renewal date, provided your work experience history is adequate and the current competency test paper is completed satisfactorily (80% minimum pass rate required).
Note 7	20177 is a new unit standard registered by NZQA in August 2003, it will not become mandatory until available from NZQA accredited training providers. TESSO will continue to recognise for registration purposes an equivalence in training from applicants listing under question 11, “Other”, the completion of appropriate Vendor cabling installation courses from Krone, Avaya, Leviton, Nexans, Molex, Siemon and Tyco (AMPACT).
Note 8	The TESSO Board has agreed that the mandatory requirement for a Site Safe passport will be waived until your registration renewal date, provided your work experience history is adequate. Details on Site Safe passports are available from Site Safe New Zealand – www.sitesafe.org.nz - There are 50 trainers nationwide available to deliver the 4-hour course for the commercial passport.
Note 9	Please list under question 11 the details of any appropriate technical Vendor premise cabling installation courses, copies of course certificates should also be attached.
Note 10	20176 is a new unit standard registered by NZQA in August 2003, it will not become mandatory until available from NZQA accredited training providers. TESSO will continue to recognise for registration purposes an equivalence in training from applicants listing under question 11, “Other”, the completion of a customer access network basic cabling course with DJC & Associates Ltd; and initially, an equivalence in training from applicants listing under “Other” the completion of appropriate technical training courses from ETITO registered training workplaces (RTW), or, for example, traditional Post Office/Telecom/BCL/Railways type basic training. Details of course content for any listed RTW training must be attached to this application.
Note 11	The TESSO Board has agreed that the mandatory requirements for a Transit NZ certification will be waived until your registration renewal date, provided your work experience history is adequate. Details on Transit New Zealand Temporary Traffic Management (CoPTTM) are available from the website – www.transit.govt.nz
Note 12	Please list under question 11 the details of any appropriate technical access network cabling installation courses, copies of course certificates should also be attached.