

# INTRODUCTION

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## NZMPTA Water Industry Certificate of Recognition

### Purpose:

The New Zealand Milking and Pumping Trade Association Inc (MPTA) has developed an internal industry certification to acknowledge those technicians currently working within the water-based pumping systems industry (the industry) that have many years experience but no *formal* trade training or qualification. The Certification recognises the skills that have been acquired throughout a technician's career and will add credibility and confidence to our skilled workforce and populate the industry with recognised, competent tradespeople.

The attached information and Application Form sets out what is required from Applicants to enable MPTA to assess and confirm skill levels for technicians who have been working within the industry for more than eight years. Applicants are required to have a broad knowledge of the industry and a prescribed standard of skills and knowledge which will be assessed by an independent Assessor before the Certification shall be awarded.

### Audience:

People who have worked as technicians or tradespeople in the water-based pumping systems industry for more than eight years.

### Pre-requisite:

Applicants **must**:

1. be currently employed in the industry for a minimum of the past two years
2. have a minimum of 8 years (full-time) relevant experience in the industry
3. have completed a Pump Selection training course e.g. MPTA, Davey or Grundfos online (or equivalent)
4. have successfully completed the NZQA micro-credential Assessments **and** Evidence Workbook for Selecting the Right Pump for Rural Fluid Systems (this will be provided to you for completion).
5. have completed Health & Safety training i.e. WorkSafe Certificate, Site Safe Passport (or equivalent)
6. have completed an element of Water Quality training e.g. water reticulation training, filtration training, water sampling
7. present details of work history, roles / tasks undertaken and contact details of employer and three referees.

Note: If the required compulsory training as above has not been undertaken, we recommend that the Applicant undertake appropriate training in these topics before proceeding with the Application and provide the relevant evidence of completion. Such training can be completed online or face-to-face via [MPTA](#), [Davey Water Products](#), [Grundfos](#), WorkSafe etc.

Where evidence of the above pre-requisites cannot be provided the employer or manager may verify the Applicant's capability in these areas. In the case of a self-employed Applicant; they may self-verify and have the verification supported by an industry peer.

### Cost:

The cost to have your Application assessed is \$250.00 for MPTA Members or \$800.00 for Non-MPTA Members + gst.

## Application Process:

An Application for Assessment of Prior Learning is attached.

The Applicant should complete the Application and gather all of the relevant information, evidence and references to demonstrate their level of knowledge, skills and experience.

Applications should be submitted to MPTA either by post to P O Box 10514, Te Rapa Hamilton 3241, or by email to [info@nzmpa.co.nz](mailto:info@nzmpa.co.nz).

**IMPORTANT: Applications should be thorough and robust and should provide all of the information and evidence required. Incomplete Applications will be returned without being sent for assessment.**

## Assessment Process:

Once the Application has been completed and all evidence submitted the Application will be assessed by an independent Assessor who will evaluate the information and evidence provided. The Assessor may request additional information from the Applicant, their employer, past employers and referees to fully assess the skill level of the Applicant. Once the assessment is complete, the Assessor will give their recommendations to MPTA Council as to if the NZMPTA Water Industry Certificate of Recognition should be awarded to the Applicant.

The Referees you have supplied and your Employer, or Industry Peer Verifier, will be contacted by the Assessor. Following a peer review, if satisfied with the evidence provided and the recommendations from the Assessor, NZMPTA may award the Certification to the Applicant.

The assessment process shall be completed within one month from receiving the Application and all relevant information and evidence.

Note: A candidate will have two opportunities to submit the correct information for the micro-credential assessment. If the assessment result is Not Achieved after two attempts then this Application will be void and further Applications will only be considered after a stand-down period of 12 months. Payment will be required for subsequent Application assessment.

## Tenure of this Certification Pathway:

This Certification Pathway purpose is to recognise the experience and skills gained by those who have worked in the water-based pumping systems industry for more than eight years and to populate the industry with recognised, competent tradespeople. The tenure of this pathway is intended to be available for Applicants for a period of three years only, until 31<sup>st</sup> March 2027. This three-year timeframe allows those technicians with only five or more years experience to work towards this Certification before 31/03/2027. Those technicians with less than five years experience in the industry should utilise other training pathways to become recognised in this field such as the Pumping strand of the [Dairy Systems \(Engineering\) Apprenticeship](#) or the [MPTA On-farm Water Diagnostics Specialist pathway](#).

## Disclaimer:

The New Zealand Milking and Pumping Trade Association Inc (MPTA) may award the MPTA Water Industry Certificate of Recognition to Applicants who satisfactorily meet the criteria set out in this document and the Application requirements. The awarding of this Certification does not afford any guarantee or warranty of past or future work undertaken by the recipient. The onus remains with the Certification recipient and / or their Employer to ensure all work completed by the Certification recipient complies with relative Laws, Acts and Regulations, including the Health & Safety at Work Act 2015, and that all work completed is of a satisfactory standard and fit for purpose. This Certification is issued on the basis that MPTA, and it's agents used as Assessors, are excluded of any liability, including liability for negligence, for all or any damages or liability in respect of or arising from work the Certification recipient has completed, related or otherwise of this Certification.

## ASSESSMENT of PRIOR LEARNING APPLICATION FORM

### NZMPTA Water Industry Certificate of Recognition

#### Section 1: Personal Information

In accordance with the Privacy Act 1993, all information requested by MPTA in this form is for the purposes of evaluating the Applicant's suitability for the awarding of the Certificate.

The Applicant's personal information may be shared with NZQA, QCONZ, nominated referees and employer/s for the purposes of verification and outcome.

Your full name:

Your preferred name:

(the name you prefer to be known as)

Your Address:

Street

Suburb

Town / City

Post Code

Tick your preferred method of contact

Phone:

(02 )

Mobile

(0 )

Work

Email:

Date of birth:

(e.g. 15 September 1990)

NZQA NSN number:

(If known)

## Section 2: Current Business / Employer Information

**If you own your own business, complete this section:**

Business name:

Business Physical address:

Street

Suburb

Town / City

Post Code

Business Postal address:

(if different)

Address Line

Town / City

Post Code

**If you are an employee, complete this section:**

Current Employer Company:

Employer's Physical address:

Street

Suburb

Town / City

Post Code

Employer's Postal address:

Employer's Contact person:

Address Line

Town / City

Post Code

Employer's Contact:

(0 )

Phone

(02 )

Mobile

Employer's Email:

## Section 3: Work History

Are you still working in the water-based pumping systems industry relevant to the skills recognition you are applying for? If not, your Application will not be considered).	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
Number of years experience within the industry?	(e.g. 18 years)			

List your work history over the last 10 years, starting with your current employer/business. Only include employers or owned businesses that are relevant to the pumping, water & / or effluent sectors. NOTE: If you have an up-to-date CV that includes this information, you do not need to complete this section – simply attach your CV to the Application.

1. **Current** employer name:

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Dates employed:

Company:

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Position/s held and responsibilities within role:

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2. Previous employer name:

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Dates employed:

Company:

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Position/s held and responsibilities within role:

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3. Previous employer name:

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Dates employed:

Company:

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Position/s held and responsibilities within role:

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4. Previous employer name:

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Dates employed:

Company:

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Position/s held and responsibilities within role:

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## Section 4: Relevant Courses, Certificates and Qualifications

Tick the courses below that you have attended, provide the course dates and attach copies of the Completion Certificates to this Application. (Note: if evidence is not available then written verification will be required from Employer or Industry Peer that you have undertaken the training – see page 7).

<input type="checkbox"/>	<b>Water Quality</b> (compulsory)		
		Provider	Course Date
<input type="checkbox"/>	<b>Health &amp; Safety in the Workplace</b> (compulsory)		
		Provider	Course Date
<input type="checkbox"/>	<b>Pump Selection / Principles of Pumping</b> (compulsory)		
		Provider	Course Date
<input type="checkbox"/>	<b>Farm Dairy Effluent Hydraulic Design</b>		
		Provider	Course Date
<input type="checkbox"/>	<b>Farm Water Reticulation Design</b>		
		Provider	Course Date
<input type="checkbox"/>	<b>Small Drinking Water Supplies</b>		
		Provider	Course Date
<input type="checkbox"/>	<b>Water Safety Planning for Small Drinking Water Supply</b>		
		Provider	Course Date
<input type="checkbox"/>	<b>Backflow Prevention</b>		
		Provider	Course Date
<input type="checkbox"/>	<b>Irrigation</b>		
		Provider	Course Date

Tick the certificates or registrations you hold, if applicable, and attach certified copies to this Application.

<input type="checkbox"/> <b>Electrical Service Technician (EST) Registration</b>	<input type="checkbox"/> <b>Current WorkSafe Certificate / Site Safe Passport</b>	<input type="checkbox"/> <b>Current First Aid / CPR</b>
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Provide details of any other courses you have attended, or any certificates, qualifications or registrations you hold (e.g. Certificate in Agricultural Engineering) that are relevant to the water-based pumping systems or effluent sectors and attach copies of the Certificates to this Application.

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## Section 5: Declarations

This section is made up of three parts, **two** of the three sections must be completed.

**Part 1 is to be completed by the Applicant**

**Part 2 is to be completed by the Applicant's Employer (in the case of the Applicant being self-employed use Part 3).**

**Part 3 is to be completed by an Industry Peer if the Applicant is self-employed in the industry**

### Declaration Part 1: (to be completed by the Applicant)

I, \_\_\_\_\_, hereby declare that all information provided within this Application, including the attached evidence, is complete and true to the best of my knowledge and that the tasks specifically detailed have been completed by myself in the capacity of the responsibility that I have stated.

I declare that the Skills / Knowledge Assessment that forms part of this Application has been completed solely by myself, without the input from any third party.

I accept that in MPTA awarding me the NZMPTA Water Industry Certificate of Recognition it does not afford any guarantee or warranty of my past or future work. The onus is on myself and / or my employer to ensure all work completed by myself complies with relative Laws, Acts and Regulations, including the Health & Safety at Work Act 2015, and that all work completed is of a satisfactory standard and fit for purpose. I acknowledge that this Certification is issued on the basis that MPTA is excluded of any liability, including liability for negligence, for all or any damages or liability in respect of or arising from work I have completed, related or otherwise of this Certification.

I declare that I have an understanding of, and abide by, relevant industry Regulations, Laws, Acts, Codes of Practice, Best Practices etc as would reasonably be expected of someone with my experience within the industry.

I have sought the permission of the referees provided to act as witnesses in regards to my work. These referees have worked closely with me in the past and are not members of my immediate or extended families.

I give permission for MPTA, and their nominated Assessors, to contact myself, my referees, my employer and former employers (if relevant) in regards to this Application.

I agree to undertake further assessment, if necessary, by either face-to-face, video conference or phone at a time and date to be arranged between myself, my employer (if relevant) and a MPTA appointed Assessor.

I understand that MPTA has the right to reject my Application if it is found that:

- I have falsified my Application in part or as a whole
- I do not have enough experience, skill or knowledge to qualify for this assessment of my skills and experience, as deemed by the MPTA assessment process
- I am not currently employed in a role relevant to the pumping, water and / or effluent sectors

I understand that the New Zealand Milking and Pumping Trade Association Incorporated is a Member-owned Trade Association and not a Statutory Licensing Body, Regulator or similar.

\_\_\_\_\_  
 Applicant's Signature:

\_\_\_\_\_  
 Date:

## Declaration Part 2: (to be completed by the Applicant's Employer)

I, \_\_\_\_\_, (name of Employer) hereby declare that, to the best of my knowledge, all information provided within this Application and in support of this Application by \_\_\_\_\_ (the Applicant), is true & complete and that the tasks specifically detailed have been completed by the Applicant in the capacity of the responsibility they have stated.

I verify that the Applicant demonstrates the expected skills and knowledge as would be expected from completing the training courses they have detailed in Section 4 of this Application. And that, where formal training has not been attained for the compulsory training in Water Quality, Pump Selection / Principles of Pumping, and Health & Safety in the Workplace, or evidence of that formal training is not available, the Applicant demonstrates a suitable level of skill, understanding and capability to safely and knowledgeably undertake works in consideration of these areas.

I declare that the Applicant has an understanding of, and abides by, relevant industry Regulations, Laws, Acts, Codes of Practice, Industry Best Practice /setc.

I accept that in MPTA awarding the Applicant the NZMPTA Water Industry Certificate of Recognition it does not afford any guarantee or warranty of their past or future work. The onus is on the Applicant and / or myself, as the employer, to ensure all work completed by the Applicant complies with relative Laws, Acts and Regulations, including the Health & Safety at Work Act 2015, and that all work completed is of a satisfactory standard and fit for purpose. I acknowledge that this Certification is issued on the basis that MPTA is excluded of any liability, including liability for negligence, for all or any damages or liability in respect of or arising from work completed by the Applicant, related or otherwise of this Certification.

I understand that the New Zealand Milking and Pumping Trade Association Incorporated is a Member-owned Trade Association and not a Statutory Licensing Body, Regulator or similar.

\_\_\_\_\_  
Employer's Signature:

\_\_\_\_\_  
Date:

## Declaration Part 3: (to be completed by an Industry Peer if the Applicant is self-employed)

I, \_\_\_\_\_, (name of Industry Peer) hereby declare that, in my personal opinion, \_\_\_\_\_ (the Applicant) demonstrates the expected skills and knowledge as would be expected from their years in the Water based Pumping Systems industry and from completing the training courses they have detailed in Section 4 of this Application. And that, where formal training has not been attained for the compulsory training in Water Quality, Pump Selection / Principles of Pumping, and Health & Safety in the Workplace, or evidence of that formal training is not available, the Applicant demonstrates a suitable level of skill, understanding and capability to safely and knowledgeably undertake works in consideration of these areas.

In giving this Declaration in support of the Applicant's skill, understanding and capability to work in the water based pumping systems fields I am not affording any guarantee or warranty of their past or future work. The onus is on the Applicant and / or their employer (if relevant) to ensure all work completed by the Applicant complies with relative Laws, Acts and Regulations, including the Health & Safety at Work Act 2015, and that all work completed is of a satisfactory standard and fit for purpose. This Declaration is given on the basis that I am excluded of any liability, including liability for negligence, for all or any damages or liability in respect of or arising from work completed by the Applicant, related or otherwise of this Certification.

\_\_\_\_\_  
Industry Peer's Signature:

\_\_\_\_\_  
Date:



## Section 6: Referees

Please provide details of three Referees that must be people you have worked in the industry with who can attest to your competency, knowledge, ability and skills in the industry. Referees may not be family members.

Before providing your referee's details, ask them if they are happy to speak to an Assessor about your work. Referees will either be contacted by phone or face-to-face.

### Referee 1

Name:

Company:

Position:

Phone number:

<input type="text"/>	Best time to call: <input type="text"/>
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### Referee 2

Name:

Company:

Position:

Phone number:

<input type="text"/>	Best time to call: <input type="text"/>
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### Referee 3

Name:

Company:

Position:

Phone number:

<input type="text"/>	Best time to call: <input type="text"/>
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## Application Checklist

This checklist is provided to help ensure you include all the information needed for an Assessor to make a judgment on your Application. If any of the boxes are not checked then please go back and complete, ensuring all the evidence is provided. Incomplete Applications will not be processed.

Ensure ALL of the following information is provided:	Applicant to complete	MPTA use only
Introduction: All Entry Criteria has been met	<input type="checkbox"/>	<input type="checkbox"/>
NZQA mirco-credential Assessments <b>and</b> Evidence Workbook for Selecting the Right Pump for Rural Fluid Systems have been completed and evidence provided	<input type="checkbox"/>	<input type="checkbox"/>
Section 1: Personal Information is completed	<input type="checkbox"/>	<input type="checkbox"/>
Section 2: Current Business <b>or</b> Employer Information is completed	<input type="checkbox"/>	<input type="checkbox"/>
Section 3: Work History is completed, <b>or</b> an up-to-date CV is attached with Application	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
Section 4: Copies of all relevant Certificates and Qualifications are attached <ul style="list-style-type: none"> <li>- Water Quality (compulsory)</li> <li>- Health &amp; Safety in the Workplace (compulsory)</li> <li>- Pump Selection / Principles of Pumping (compulsory)</li> <li>- Evidence of other related training completed</li> </ul>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
Section 5: Declaration Forms are signed (2 of the 3 Declarations must be completed)	<input type="checkbox"/>	<input type="checkbox"/>
Section 6: Referees – details of three Referees are supplied	<input type="checkbox"/>	<input type="checkbox"/>
Payment: Who shall the invoice for the Assessment Fee be issued to? <ul style="list-style-type: none"> <li>- The Applicant directly, <b>or</b></li> <li>- The Applicant’s current Employer</li> </ul>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>

After completing the Application form, compiling your evidence and signing the declaration, please send to:

**Assessment Team**

**MPTA, P O Box 10514, Te Rapa, Hamilton 3241**

**Or scan all documents and email to [info@nzmpa.co.nz](mailto:info@nzmpa.co.nz)**

***An invoice will be issued on receipt of your Application***

**If you have any questions about this Application process please contact:**

**Maria Scott**

**MPTA**

**Ph. 027 449 7402 or email [info@nzmpa.co.nz](mailto:info@nzmpa.co.nz)**