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|  | **Department of Communities**  **RECORD CHECK CONSENT FORM** | Form 395  06/21 |

* **All Applicants to read “Information for Applicant” (pages 8 – 9) and complete Parts 1 - 5**
* **Adoption and Carer Applicants to also complete Part 6**
* **Department of Communities (Communities) or Agency Officer to complete Parts 7 - 10**
* **Please use BLOCK LETTERS and crosses in boxes marked** 🞎

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| **Part 1: Applicant Details** |

Family Name/Surname (current)

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All Given Names (current)

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Male Female X (Indeterminate/intersex/unspecified) Date of Birth (DD/MM/YYYY)

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Country of Birth

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State/Territory and Town/Suburb of Birth

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If you were not born in Australia please state the month and year you arrived in Australia (MM/YYYY)

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*C:\Users\amandadi\AppData\Local\Microsoft\Windows\Temporary Internet Files\Content.IE5\KDFZ1QQM\Paper Clip Brooch- Red by Tatty Devine[1].jpgIf you have arrived in Australia within the last five years and have a Permanent Residency Visa, Aust. Citizenship Certificate or Criminal Record Clearance (from the country you resided in), please attach copies to the form*.

If you hold a Drivers Licence, Firearms Licence or Passport you must provide the details below.

Driver’s Licence Number Expiry Date (DD/MM/YYYY) State/Territory or Country of Issue

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Firearm Licence Number Expiry Date (DD/MM/YYYY) State/Territory or Country of Issue

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Passport Number Expiry Date (DD/MM/YYYY) State/Territory or Country of Issue

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Daytime Contact Number

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Email Address

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*C:\Users\amandadi\AppData\Local\Microsoft\Windows\Temporary Internet Files\Content.IE5\KDFZ1QQM\Paper Clip Brooch- Red by Tatty Devine[1].jpg***Any other name(s) by which you are or have been known, including aliases, changes by marriage, Deed Poll etc. (regardless of the length of time elapsed since you have used the name).** Additional sheet attached?  Yes

Family Name/Surname

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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All Given Names Years known by this name (YYYY/YYYY)

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Reason for name change

|  |  |  |  |  |  |  |  |
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| Maiden |  | Alias |  | Deed Poll |  | Previous Married Name |  |

Family Name/Surname

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All Given Names Years known by this name (YYYY/YYYY)

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Reason for name change

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| Maiden |  | Alias |  | Deed Poll |  | Previous Married Name |  |

Family Name/Surname

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All Given Names Years known by this name (YYYY/YYYY)

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Reason for name change

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| Maiden |  | Alias |  | Deed Poll |  | Previous Married Name |  |

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| **Part 2: Current Address of Applicant** |

Please complete your residential address (PO Box or business addresses are not acceptable)

Unit Number/Street Number/Street Name (with gap between words)

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Suburb/Town/Locality State/Territory Postcode

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Period of Residence (DD/MM/YYYY)

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| From: |  |  | **/** |  |  | **/** |  |  |  |  |  |
| **Part 3: Previous Residential Address(es) (including overseas addresses) for the past five years** | | | | | | | | | | | | |

Same as your current address (for the past five years)

You must include your previous residential addresses over the **last FIVE years (including any overseas addresses)**. If you do not know the full details of previous addresses please include as much information as possible.

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Additional sheet attached?  Yes

1. **Previous Residential Address – please start with the most recent**

Unit Number/Street Number/Street Name (with gap between words)

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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Suburb/Town/Locality State/Territory Postcode Country (if outside Australia)

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Period of Residence (DD/MM/YYYY)

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1. **Previous Residential Address**

Unit Number/Street Number/Street Name (with gap between words)

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Suburb/Town/Locality State/Territory Postcode Country (if outside Australia)

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Period of Residence (DD/MM/YYYY)

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1. **Previous Residential Address**

Unit Number/Street Number/Street Name (with gap between words)

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Suburb/Town/Locality State/Territory Postcode Country (if outside Australia)

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Period of Residence (DD/MM/YYYY)

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1. **Previous Residential Address**

Unit Number/Street Number/Street Name (with gap between words)

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Suburb/Town/Locality State/Territory Postcode Country (if outside Australia)

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Period of Residence (DD/MM/YYYY)

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| **Part 4: Working with Children Card Details** |

If you are the holder of a current Working with Children (WWC) Card, please specify the details here and either attach a copy of your card or have the Communities or agency officer sight your card and sign below.

**WWC notice number Expiry Date** (DD/MM/YYYY)

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| I,(name of WWC Card holder) |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

consent to the Working with Children Screening Unit disclosing the result of criminal record checking in relation to me carried out under the Working with Children (Criminal Record Checking) Act 2004 to Communities as follows:

1. “no record to release” where the checking indicates that the WWC Screening Unit has received no information indicating that I have been convicted or charged with any offence; or
2. “invalid notice number” where an inquiry does not recognise the Notice Number on my Working with Children Card; or
3. “information not available” where a. or b. do not apply.

**Applicant’s Signature Date** (DD/MM/YYYY)

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**WWC Card & applicant’s signature sighted by Signature**

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| **Part 5: Informed Consent for Client and Child Protection Check and Nationally Coordinated Criminal History Check** | |
| I…………………………………………………………. | …………………………………………………………. |
| **Family Name (Current)** | **All Given Names (Current)** |

**Client and Child Protection Check Consent**

1. Certify that the information I/the applicant have provided on this form is complete and correct;
2. Consent to the Department of Communities undertaking a search of its client and child protection records as requested by the agency named on this form (if applicable to the role for which I am being assessed);
3. Understand that whilst a Nationally Coordinated History Check is not completed for someone under the age of 18, that that Communities will undertake a search of its client and child protection records for all household members who are listed in Part 6 of this Form, and who are above the age of 10 and under the age of 18;
4. Understand that all household members who are 18 years of age or older will be required to fill out their own record check consent form and will have their own checks completed;
5. Understand that all identifying and Client and Child Protection Check information about me/the applicant will be held in the strictest confidence and will not be used for any other purpose than to assist the assessment of my suitability to be engaged by the agency named on this form; and
6. Understand that this ‘Consent Form’ will be administered and confidentially retained by the Screening Unit.

**Nationally Coordinated Criminal History Check – Consent to Obtain and Release Personal and Sensitive Information**

1. Acknowledge that I/the applicant understand the information on this form.
2. acknowledge that the Department of Communities is collecting information in this form to provide to the Australian Criminal Intelligence Commission (ACIC) and police agencies, for a nationally coordinated criminal history check to be conducted for the purpose outlined in Part 9 of this form.
3. Have fully and accurately completed this form, and the personal information I/the applicant, have provided relates to me/the applicant, and contains the full name and all names previously used by me/the applicant.
4. Acknowledge that withholding and/or providing misleading or false information on this form and in any supplied identity documents is a Commonwealth offence and may lead to prosecution under the Criminal Code Act 1995 (Cth).
5. Acknowledge that personal information that I/the applicant provided in this form and on the supplied identity documents may be disclosed to Communities (including contractors, legal entity customers, related bodies or third parties) named in Part 5 of this form in Australia or overseas, if applicable).
6. Acknowledge that any information sent by mail or electronically, in relation to this form, including identity documents, is sent at my/the applicant’s risk and I/the applicant, am/is aware of the consequences of sending information in these ways.
7. Acknowledge that I/the applicant am/is aware that I/the applicant am/is providing consent for a national check to be conducted on all personal information provided in this form and provided in suppled identity documents.
8. Understand and consent to police information relating to me/the applicant, being disclosed in accordance with the purpose identified in Part 9 of this form, applicable legislation and information release policies (including spent convictions legislation described in Australian Government and state or territory legislation).
9. give consent to:
10. the ACIC and police agencies using and disclosing my/the applicant’s personal information that I/ the applicant, have provided in this form and personal information contained in my supplied identity documents to conduct a nationally coordinated criminal history check.
11. the ACIC disclosing the police information sourced from the police agencies to other approved bodies and the Department of Communities.
12. the Department of Communities disclosing to the third parties also detailed in Part 5, my/the applicant’s personal information and police information to assess my/the applicant’s suitability for the purpose identified in Part 9 of this form.
13. Acknowledge that it is usual practice for my/the applicant’s personal information and police information to be used by police agencies and the ACIC for law enforcement, including purposes set out in the Australian Crime Commission Act 2002 (Cth).
14. Consent to the Department of Communities using the Passport and personal details I have provided in Part 1 to conduct a check of my Australian Visa details through the Department of Home Affairs (Cth) Visa Entitlement Verification Online (VEVO) system to satisfy the International Police Check requirement and/or the minimum identity proofing requirements (if required).

**Note: The information you provide on this form, will be used only for the purpose stated above unless statutory obligations require otherwise.**

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| **Authorisation to Disclose Personal/Sensitive Information**  Will the National Criminal History Check results be forwarded/disclosed by Communities to another party?  Yes. If Yes, I authorise the result of the Client and Child Protection Check and National Criminal History Check to be forwarded/disclosed to the following employer/organisation to assess my suitability.  Employer/Organisation (*Legal Name*) and ABN………………………………………………………..   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |   **Adoption Applicants only**  Yes. If Yes, I authorise the results of the Client and Child Protection Check and National Criminal History Check to be forwarded/disclosed to third parties for the purpose of preparing reports under the Adoption Act 1994 (WA) and acknowledge that any such reports may be provided to Adoption Applicants Committee and/or the Family Court of Western Australia. |
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| Applicant’s Signature: Date(DD/MM/YYYY):   |  |  |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | |  |  |  |  | **/** |  |  | **/** |  |  |  |  | |
| Parent or legal guardian (where the applicant is under the age of 18)   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | | **Name:** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |   Signature: Date(DD/MM/YYYY):   |  |  |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | |  |  |  |  | **/** |  |  | **/** |  |  |  |  | |
| Authorised agent (person responsible for the applicant, such as a legal representative)   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | | **Name:** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |   Signature: Date(DD/MM/YYYY):   |  |  |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | |  |  |  |  | **/** |  |  | **/** |  |  |  |  | |

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| **Part 6: Household Member Details – Adoption and Carer applicants only to complete** |

Household member refers to any other person/s who permanently reside in your home.

**Do you have any household members?**  Yes  No

C:\Users\amandadi\AppData\Local\Microsoft\Windows\Temporary Internet Files\Content.IE5\KDFZ1QQM\Paper Clip Brooch- Red by Tatty Devine[1].jpgPlease record all household members’ details below. If more room is required, list on a separate sheet, sign, and attach the sheet to this form.

Additional sheet attached?  Yes  No

**Household members 18 years of age and over must also complete their own Record Check Consent Form.**

**Household member 1**

Family Name/Surname

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Male Female X Date of Birth (DD/MM/YYYY)

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Relationship to Applicant (e.g. de facto, wife, husband, mother, father, brother, sister, child etc.)

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**Household member 2**

Family Name/Surname

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Male Female X Date of Birth (DD/MM/YYYY)

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Relationship to Applicant

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**Household member 3**

Family Name/Surname

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**Household member 4**

Family Name/Surname

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Relationship to Applicant

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**Household member 5**

Family Name/Surname

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Relationship to Applicant

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| **Part 7: Authorised Officer Details** |

The Authorised Officer is the person to whom the National Police History Check is disclosed to. They must be a Communities L5+ Officer/selection panel chair/SC1+ or SCPW Placement Services or nominated Non-Government Agency Officer.

Communities Officer  Non-Government Agency Officer

Agency Name (if other than Communities) District

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Position Title (and Level for Communities officers)

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| **Part 8: Nominated Work Unit Officer/Admin Officer/Business Manager** |

The Officer nominated here may be contacted regarding administrative queries for this applicant’s checks.

Position Title (and Level for Communities officers)

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| **Part 9: Purpose of the Check** |

Please mark the purpose of the Record Check in the table below and complete the questions a – f as outlined in the table.

***Is this an urgent placement of a child under section 79(2)(b) of the C&CS Act 2004? Yes*  *No***

**If yes, please specify the child’s name below (one child’s name is sufficient for sibling groups)**

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| **PURPOSE OF THE CHECK**  *Please mark appropriate purpose with an ‘X’ in the list below* | **QUESTIONS TO BE COMPLETED BELOW** | | | | | |
| Foster Carers |  | **b** | **c** | **d** | **e** |  |
| Family Carer/Significant Other Carers/Specific Child Carers |  | **b** | **c** | **d** | **e** |  |
| Family Indigenous Community Carers |  | **b** | **c** | **d** | **e** |  |
| Carer Household Members |  | **b** | **c** | **d** | **e** | **f** |
| Contractors (Contract for Service) | **a** | **b** | **c** | **d** | **e** |  |
| Communities employees (Permanent appointment) | **a** | **b** | **c** | **d** | **e** |  |
| Communities employees (fixed term/casual Contract of Service) | **a** | **b** | **c** | **d** | **e** |  |
| Adoption applicants |  | **b** | **c** | **d** | **e** |  |
| Step Parent, Family or Carer Adoption Applicants |  | **b** | **c** | **d** | **e** |  |
| Joint Adoption and General Foster Carer applicants |  | **b** | **c** | **d** | **e** |  |
| Communities volunteers | **a** | **b** | **c** | **d** | **e** |  |
| Students/Work experience | **a** | **b** | **c** | **d** | **e** |  |
| Non-Government agency employees (including group home workers) | **a** | **b** | **c** | **d** | **e** |  |
| Non-Government agency foster carers (who provide care in their own homes) | **a** | **b** | **c** | **d** | **e** |  |
| Non-Government agency volunteers |  | **b** | **c** | **d** | **e** |  |
| Other (please specify below e.g. committee member) | **a** | **b** | **c** | **d** | **e** |  |

1. If an employee, contract for or of service, a volunteer or other, please specify the **position title**:

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b) **Will the applicant have contact with children in CEO’s care/clients &/or their records? Yes  No**

1. Has the applicant been engaged by Communities or Non-Government agency previously or in an alternate role?

Yes  No  If yes, how long ago; 0 – 6 months  or 6 months or more

1. Proposed place of work. Include the State and Town/Suburb in which work/role will be undertaken:

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| Office based  **TOWN/SUBURB** | Office and domestic work sites | Group home/residential facility | In own home  **STATE** |

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1. Will the applicant be required to drive a vehicle as part of the core duties of the role for which they are being considered? Yes  No
2. If the applicant is a **carer household member** you must specify the **name of the primary carer below**.

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| **Part 10: Proof of Identity Check** |

When completing this form, the applicant must provide proof of their identity (see Minimum Identity Requirements below).

A Communities or Non-Government agency officer **must sight all original or certified true copies of identity documents and verify the link between the applicant and the identity documents provided by comparing the applicant’s face against a photograph provided** (either on a Primary or Commencement ID document or a passport-style photograph certified by a person listed in Schedule 2 of the Statutory Declarations Regulations 1993 (Cth)).

A certified copy means a document that has been certified as a true copy of an original by a person listed in Schedule 2 of the *Statutory Declarations Regulations 1993 Cth)* which is available from <http://www.comlaw.gov.au> by searching for *“Statutory Declarations Regulations 1993”*. A Justice of the Peace or another public servant may complete this part if it is not practical for a Communities/Agency Officer to do so.

Please check identity documents against the applicant’s details recorded in Part 1 to ensure that they are the same (e.g. spelling, middle names, date of birth etc.)

**Minimum Identity Requirements**

The applicant must provide four documents to confirm their identity:

* One commencement of identity document to confirm their birth in Australia or arrival to Australia
* One primary; and
* two secondary documents to show the use of their identity in the community.

The documentation provided must include evidence of the full name and date of birth and a photo. The commencement or primary documents provided must contain a photo of the applicant. If the commencement or primary documents do not include a photo of the applicant; the applicant must submit a passport-style photograph certified by a person listed in Schedule 2 of the Statutory Declarations Regulations 1993 (Cth).

**Change of Name**

If the applicant provides identity documents using a former name (e.g. birth certificate in maiden name and driver’s licence in married name) they must provide evidence of their name change. This means providing a change of name certificate issued by the Australian Registry of Births, Deaths and Marriages or an Australian marriage certificate issued by a state or territory, in addition to the four identity documents. These documents must be originals or certified true copies. Church or celebrant-issued certificates are not acceptable. If a change of name document is provided the applicant must provide the other names they have used in Part 1 of this form.

**Special provisions for proof of identity**

If you/the applicant is unable to meet the minimum proof of identity requirements please contact the Screening Unit via [screeningunit@communities.wa.gov.au](mailto:screeningunit@communities.wa.gov.au) who will assess your/the applicant’s ability to meet the requirements and determine the most suitable method to confirm your identity.

**Please mark sighted identity documents with an ‘**X’ **and where indicated record the applicant’s name as it appears on the relevant document in the space provided (or attach a copy of the document).**

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| **Proof of Identity Documents** |
| **Commencement documents (one commencement document must be provided by the applicant)**  full Australian birth certificate (not an extract or birth card)  **☐** current Australian Passport (not expired or cancelled)  Australian Visa current at the time of entry to Australia as resident or tourist \*  ImmiCard issued by the Department of Immigration and Border Protection  certificate of identity issued by the Department of Foreign Affairs and Trade to refugees non-Australian citizens for entry to Australia  document of identity issued by the Department of Foreign Affairs and Trade to Australian citizens or persons who possess the nationality of a Commonwealth country, for travel purposes  certificate of evidence of resident status  Australian Citizenship Certificate  **Applicant’s name as it appears on the Commencement identity document sighted:**   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |   \* A Visa Entitlement Verification Online (VEVO) record may be provided. If you are a New Zealand citizen on a Special Category Visa, the Screening Unit can request your VEVO details from the Department of Home Affairs. |
| **Primary documents (in addition to the commencement document provided; one primary document must be provided by the applicant)**  current Australian driver licence, learner permit or provisional licence issued by a state or territory, showing signature and/or photo and the same name as claimed  Australian marriage certificate issued by a state or territory (church or celebrant-issued certificates are not accepted)  current passport issued by a country other than Australia with a valid entry stamp or visa  current proof of age or photo identity card issued by an Australian government agency in your name with photo and signature (includes WA WWC card)  current shooter or firearm licence showing signature and photo (not minor or junior permit or licence)  for persons aged under 18 with no other Primary Use in Community Documents, a current student identification card with photo or signature  **Applicant’s name as it appears on the Primary identity document sighted:**   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |
| **Secondary documents (in addition to the one commencement and one primary document provided; two secondary documents must be provided by the applicant)**  certificate of identity issued by the Department of Foreign Affairs and Trade  document of identity issued by the Department of Foreign Affairs and Trade  convention travel document secondary (United Nations) issued by the Department of Foreign Affairs and Trade  foreign government issued documents (for example driver licence)  Medicare card  enrolment with the Australian Electoral Commission  security guard or crowd control photo licence  evidence of right to a government benefit (Centrelink or Veterans Affairs)  consular photo identity card issued by the Department of Foreign Affairs and Trade  photo identity card issued to an officer by a police force  photo identity card issued by the Australian Defence Force  photo identity card issued by the Australian Government or a state or territory government (**includes** **Working with Children Card**)  Aviation Security Identification Card  Maritime Security Identification card  credit reference check  Australian tertiary student photo identity document  Australian secondary student photo identity document  certified academic transcript from an Australian university  trusted referees report  bank card, credit card or bank statement (without recording the payment card number/s)  state/territory government rates assessment notice or Australian Taxation Office assessment notice  Australian utility bill showing name and address  Australian Private Health Insurance Card  Australian Trade Association card  **Applicant’s name as it appears on the Secondary identity document 1:**   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |   **Applicant’s name as it appears on the Secondary identity document 2:**   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |
| **Change of Name document (if applicable)**  change of name certificate issued by the Australian Registry of Births, Deaths and Marriages  Australian marriage certificate issued by a state or territory (Church or celebrant-issued certificates are not accepted).  **Applicant’s previous name as it appears on the Change of Name document:**   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |   **Applicant’s current name as it appears on the Change of Name document:**   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |

**Verification (to be completed by the Communities or Agency Officer who has sighted the documents.** **A Justice of the Peace or another public servant may complete this part if it is not practical for a Communities/Agency Officer to do so)**

I declare that I have sighted the applicant’s original or certified true copy of documents and verified the link between the applicant’s personal details and identity documents and I am satisfied that they are correct.

Position Title

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Signature Date (DD/MM/YYYY)

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| **INFORMATION FOR APPLICANT** |

Please read this section prior to completing the Record Check Consent form. This section is designed to assist you in completing the Record Check Consent Form and provide you with information about the sort of checks that are completed as part of the screening process.

The Department of Communities is collecting your personal information in this form in order to obtain a Nationally Coordinated Criminal History Check from the Australian Criminal Intelligence Commission (ACIC) and/or to conduct a Client and Child Protection Check and/or a Human Resources Check.

A nationally coordinated criminal history check and/or a Client and Child Protection Check are obtained to determine whether an applicant is suitable for adoptive parenthood, or for employment or engagement as a carer/household member, volunteer or student or for financial reward with Communities or a Non-Government agency. Non-Government agencies that work with children in the CEO’s care have an agreement with Communities where they are required to undertake screening through the Department.

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| **NATIONALLY COORDINATED CRIMINAL HISTORY CHECK AND PROVIDING YOUR INFORMED CONSENT** |

All applicants must undergo a Nationally Coordinated Criminal History Check.

You are required to provide your personal details and informed consent to complete this form. You must also provide your identity documents, as detailed in Part 10. If you are less than 18 years of age, this form must be completed by your parent or legal guardian.

***What is informed consent?***

Your informed consent is needed before Communities can request a nationally coordinated criminal history check on you. Your informed consent means you:

* have read and understood the information provided in this form about how your personal information and any police information relevant to you will be handled and disclosed
* provide your permission for the accredited body to request a nationally coordinated criminal history check on your behalf
* provide your permission for the accredited body to disclose your information to any organisation listed in Part 5 of this form.

***How do I provide my informed consent?***

An important aspect of providing informed consent is that you understand what you are consenting to. It is important that you read the consent statements in Part 5 and, where required, get clarification from Communities, to ensure complete understanding. You must then sign and date this form at Part 5, to give your informed consent.

**What is a nationally coordinated criminal history check?**

A nationally coordinated criminal history check is conducted with your informed consent to determine your suitability for a position of trust, specified field of endeavour or as required by legislation. A nationally coordinated criminal history check contains your personal information, and police information that is disclosable about you, according to the purpose of your check.

**Privacy notice**

**How will my information be used?**

**The ACIC and Australian police agencies**

The ACIC and Australian police agencies use the information on this form and the applicant’s identity documentation:

* to disclose police information relating to you, to Communities.
* to update records held about you
* for law enforcement, including purposes set out in the *Australian Crime Commission Act 2002* (Cth)

**Department of Communities**

Communities uses the personal information collected in this form to request a nationally coordinated criminal history check and to assure itself of your identity.

You can contact the Manager Screening Unit for more information on how Communities handle your personal information at [screeningunit@communities.wa.gov.au](mailto:screeningunit@communities.wa.gov.au)

**How is my national check result determined?**

Police information is disclosed in accordance with applicable legislation and information release policies of the Australian Government and state and territory governments.

Criminal history information may include outstanding charges, warrant information and criminal convictions/findings/pleas of guilt recorded against you that may be disclosed according to the laws of the relevant jurisdiction and, in the absence of any laws governing the release of that information, according to the relevant jurisdiction's information release policies. Applicable laws include, but are not limited to; spent convictions legislation (see section on Spent Convictions Scheme Western Australia).

Unless statutory obligations require otherwise, the information provided by you in this form and any information received by Communities in the assessment process will not be used without your prior consent for any purpose other than in relation to the assessment of your suitability; or to maintain the records of ACIC and police agencies; or for law enforcement purposes including the investigation of any outstanding offences.

**Assessment of Criminal History Check Information**

Communities undertake an individual assessment of the outcome of an applicant’s Criminal History Check, against the position requirements. An adverse Criminal History Check is where an applicant has convictions or a finding of guilt and, after considering the detail of these convictions, it is apparent that proposing to engage or employ this applicant would place Communities clients, staff or resources at risk. The adverse information will be disclosed to the applicant and Non-Government agencies named in this form, for that purpose.

Such offences that would be considered adverse include:

* Sexual offences;
* Offences of a violent nature (e.g. assault occasioning bodily harm);
* Offences involving the use of firearms or other weapons;
* Drug offences (particularly dealing/trafficking); or
* Any other offence(s) that may impact on the Communities duty of care towards its clients; and
* Information about behaviour that is regarded as less serious but forms a pattern over time and has implications for the suitability of a person to work with children and families will be considered (e.g. perpetration of family/domestic violence).

**Spent Convictions Scheme Western Australia**

Where you are applying for adoptive parenthood, for a position with Communities or a Non-Government agency which may involve you dealing with children and their families or with sensitive and confidential information about children and their families or for employment, placement; or appointment under the *Disability Services Act 1993*, there will be a complete exclusion from the application of the *Spent Convictions Act 1988 (WA).* In these circumstances, all “spent” convictions will be released to Communities and/or the relevant Non-Government agency pursuant to Schedule 3 of the *Spent Convictions Act 1988 (WA).* The spent convictions legislation is available at <https://www.slp.wa.gov.au/> by searching for “*Spent Convictions Act 1988*”.

Except under extenuating or mitigating circumstances, a person who has been convicted and found guilty of a “serious offence” as defined in the *Spent Convictions Act 1988* (WA) would normally be assessed as unsuitable for employment/engagement with Communities.

**Providing incomplete, false or misleading information**

You must take reasonable steps to ensure you provide accurate, complete and up-to-date personal information. Withholding and/or providing misleading, or false information on this form is a Commonwealth offence and you may be prosecuted under the *Criminal Code Act 1995* (Cth).

If you become aware you have provided incorrect information you must contact Communities as soon as possible.

**How do I dispute my result?**

If you do not agree with the results of your nationally coordinated criminal history check, contact the Communities Screening Unit at [screeningunit@communities.wa.gov.au](mailto:screeningunit@communities.wa.gov.au) and tell us you want to dispute the result. The Screening Unit accepts and escalates all disputes.

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| **CLIENT AND CHILD PROTECTION CHECK** |

A Client and Child Protection Check is a check of Communities client and child protection records and will be completed if you will have contact with children and/or client records. This includes;

* Employees, students, trainees, volunteers, contracts of service and contracts for service, including mentors and tutors engaged to provide services to children in care and funded agency employees who will have contact with children in the CEO’s care.
* Applicants being assessed to provide care for a child under a placement arrangement, and household members. Each household member that is listed on the Record Check Consent Form will have a Client and Child Protection Check undertaken, including children who are above the age of 10 and under the age of 18. This may include those arrangements provided by Non-Government placement services/agencies funded by Communities.
* Persons being assessed for Adoptive Parenthood.

For carer/adoption applicants and household members, this information will also be reviewed as part of the assessment process. Household members who are listed in part 6 who are over the age of 10 and under the age of 18, will also have a Client and Child Protection Record Check completed as a part of this screening. Then your suitability will be determined to provide care for a child in a way that promotes the wellbeing of the child and protects the child from harm.

Communities undertake an individual assessment where you will have contact with children and/or client records. This assessment will consider the client and child protection information and the inherent requirements of the particular job and the relationship between these.

Certain records are considered adverse and can result in a person’s ineligibility to be engaged or assessed as suitable to work in client contact positions or those involving access to confidential records, with Communities and Non-Government agencies. Adverse information refers to matters where an individual:

* Has contributed to a child being harmed or neglected, or
* Poses a serious risk of harm to a child, or
* Has evidenced behaviour or acts endangering life or health, e.g. serious drug abuse, assaults of a sexual or violent nature; or
* Information about behaviour that is regarded as less serious but forms a pattern over time and has implications for the suitability of a person to work with children and families will be considered e.g. perpetration of family/domestic violence or emotional abuse.

Adverse information suggests that an applicant may pose an unacceptable risk if they are engaged in a particular position.  In this circumstance the overriding factor to be considered is ensuring the safety and well-being of children and clients.

If you are assessed as having adverse information which leads to a decision that you will not be engaged, or raises concerns about your continued engagement, you will be fully informed of Communities view. You will be given an opportunity to respond; and, will have the right to seek a formal review of the decision in accordance with procedural fairness.

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| **INTERNATIONAL POLICE CHECK** |

An international check is required when you have resided in Australia for less than five years. An Officer from the Screening Unit will determine whether an international police clearance is required. They will request to sight your passport/visa or may undertake a check of your current visa details via the Department of Home Affairs (Cth) Visa Entitlement Verification Online (VEVO) system to determine;

* If you have a Permanent Residency Visa (PRV). A PRV may be accepted as an international clearance; or
* If you have entered Australia on a temporary visa.
* You will be required to obtain and provide an International Police Check from any countries you have lived in. Any associated costs are to be covered by you.

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| **HUMAN RESOURCES CHECK** |

Communities will undertake a Human Resources Check in some circumstances. Communities has a responsibility to not re-engage persons;

* whose services were terminated for disciplinary reasons.

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| **CONTACT DETAILS AND LODGEMENT INFORMATION** |

You can contact the Screening Unit at [screeningunit@communities.wa.gov.au](mailto:screeningunit@communities.wa.gov.au) if you require assistance completing this form, for more information on the nationally coordinated criminal history check process, how your personal information is handled, how you can dispute your criminal history check result or to request a copy of our Privacy Policy.

Incomplete or incorrectly completed forms could result in delays in processing. Once you have completed this form please send it to the following location (depending on the purpose of your application).

**ADOPTION AND JOINT ADOPTION/FOSTER CARER APPLICANTS**

Director Fostering and Adoption Services

Department of Communities

Locked Bag 5000 Fremantle WA 6959

**ALL OTHER APPLICANTS**

Screening Unit

Department of Communities (ABN: 41 889 424 592)

Locked Bag 5000 FREMANTLE WA 6959

Phone: (08) 6277 5878 (Option 3)