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Application for Working with Children Check

Issued under the Working with Children (Criminal Record Checking) Act 2004

Do not detach the Application Form until processed by Australia Post.

Please use **BLACK INK** and print within the boxes in **BLOCK LETTERS**. Use **CROSSES** in boxes marked with an

Select one Sector in which you work

Health Sector 01 **OR** Education and Training Sector 02 **OR** All others 03

Part 1: Type of Application

New Application **OR** Renewal Current Card/Notice Number

Part 2: Details of Applicant

Title (eg Mr, Mrs, Ms, Miss, Dr, Rev etc)

Family Name/Surname

Given Name/s

Preferred Name/s (complete only if different from given name/s)

Male

Female

X

Date of Birth

Daytime Contact Phone Number

Email Address (in BLOCK LETTERS)

Town of Birth

Country of Birth

Other Names you have used (includes previous, maiden name/s etc)

Title (eg Mr, Mrs, Ms, Miss, Dr, Rev etc)

Family Name/Surname

Given Name/s

Title (eg Mr, Mrs, Ms, Miss, Dr, Rev etc)

Family Name/Surname

Given Name/s

Title (eg Mr, Mrs, Ms, Miss, Dr, Rev etc)

Family Name/Surname

Given Name/s

Part 3: Current Address of Applicant

Residential Address (must be an Australian address)

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

Suburb/Town/Locality

State

Postcode

Postal Address (must be an Australian address)

Same address as above

Unit Number/Street Number/Street Name/PO Box (with a gap between words)

Suburb/Town/Locality

State

Postcode

Part 4: Previous Residential Address/es (list only Australian Addresses)

Same as your current Residential Address

You must include **previous** residential addresses over the **last five years**. If you do not know the full details of previous addresses please write the name of the town/s and the state/s. If you do not know the exact dates you lived in the places listed, please write the year you resided there. Please list up to the four most current addresses, beginning with the most recent.

1. Previous Residential Address - please start with most recent (list only Australian addresses)

Unit Number/Street Number/Street Name/PO Box (with a gap between words)

Suburb

State

Postcode

Period of Residence from

To

2. Previous Residential Address (list only Australian addresses)

Unit Number/Street Number/Street Name/PO Box (with a gap between words)

Suburb

State

Postcode

Period of Residence from

To

3. Previous Residential Address (list only Australian addresses)

Unit Number/Street Number/Street Name/PO Box (with a gap between words)

Suburb

State

Postcode

Period of Residence from

To

4. Previous Residential Address (list only Australian addresses)

Unit Number/Street Number/Street Name/PO Box (with a gap between words)

Suburb

State

Postcode

Period of Residence from

To

Part 5: Child Related Employment Details

Category of Child Related Work (see page 2)

Type of Employment

Self Employed **OR** Paid Employee **OR** Volunteer/Unpaid Position **OR** Paid Managerial Officer **OR** Unpaid Managerial Officer

Name of Organisation for which you undertake Child-related work

Applicant's job title/role in child-related work

Organisation's Phone Number

Part 6: Details of the Employer or Agency

Self employed people, Managerial Officers of body corporates that hold a child care license and people with an exemption letter do not complete this Part.

Name of Employer/Agency Representative (this person must sign the Employer Declaration in Part 7)

Position of Employer/Agency Representative

Street Address of Employer/Agency Representative (must be an Australian address)

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

Suburb/Town/Locality

State

Postcode

Postal Address of Employer/Agency Representative (must be an Australian address)

This is also the position and address to which your notice will be sent if your organisation has arranged for notices to go to a central location

Same address as above

Position to whom your notice will be sent

Unit Number/Street Number/Street Name/PO Box (with a gap between words)

Suburb/Town/Locality

State

Postcode

Part 7: Employer/Agency Representative Declaration

I certify that the information within my knowledge in this application is true and correct and that the applicant is/will be employed in child-related work. I am aware that it is an offence to give false or misleading information in this application form.

Signature of Employer/Agency Representative
Must be the person named in Part 6 above

Please sign within the box and use black ink

Date signed

Part 8: Applicant Declaration

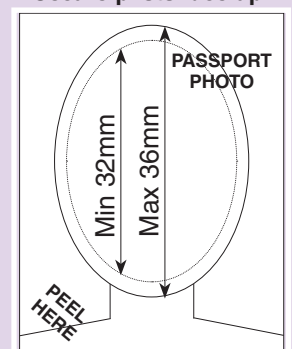
I certify that the information within my knowledge in this application is true and correct. I am aware that it is an offence to give false or misleading information on this application form. I consent to the WWC Screening Unit or an Approved Screening Agency obtaining information about my criminal record, and making use of that information for initial and ongoing checking in the ways described in the information attached to this form. I acknowledge that I have read this information.

Signature of Applicant

Please sign within the box and use black ink

Date signed

Secure photo face up



Part 9: Australia Post Use Only - Evidence of Identity (Important: Original Documents MUST be Sighted)

Has an Alternate ID Letter been sighted? Yes **▶** You do not need to complete the Evidence of Identity Check below. Go to Part 11.
 No **▶** You MUST complete the Evidence of Identity Check below.
 Letter of Exemption from completing Parts 6 and 7.

Proof of Identity Documentation. Identity can only be accepted with one of the following combinations:

Combination 1 OR A + B **Combination 2 OR** B + 3 x C **Combination 3 OR** A + 2 x C **Combination 4 (under 18 years)** A or D

See Section 4 on page 6 and 7 of the instructions for the requirements for these identity documents

Category A You may only use ONE Category A Document	A	B	C	Points	Expiry Date Checked (must be current)
Current Passport	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	70 ▶	<input checked="" type="checkbox"/> Number
An expired Passport (no more than 2 years)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	70 ▶	<input type="checkbox"/>
Australian Citizenship Certificate	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	70 ▶	<input checked="" type="checkbox"/> Country of Issue
Australian Birth Certificate	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	70 ▶	<input checked="" type="checkbox"/>
Birth Card	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	70 ▶	<input checked="" type="checkbox"/> Expiry Date
Other documents having the same characteristics as a passport	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	70 ▶	<input checked="" type="checkbox"/> DD MM YYYY

Category B	A	B	C	Points	Expiry Date Checked
Drivers Licence	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	40 ▶	<input checked="" type="checkbox"/> Number
Other Licence or Permit	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	40 ▶	<input checked="" type="checkbox"/> State of Issue
A Tertiary Student Identification Card	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	40 ▶	<input checked="" type="checkbox"/>
Department of Veterans Affairs (DVA) Card	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	40 ▶	<input checked="" type="checkbox"/> Name of education/government agency (if applicable)
Centrelink Card	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	40 ▶	<input checked="" type="checkbox"/>
Government Employee ID	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	40 ▶	<input checked="" type="checkbox"/>

Category C	A	B	C	Points	Expiry Date Checked
Medicare Card	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	25 ▶	<input checked="" type="checkbox"/>
Credit card or account card	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	25 ▶	<input checked="" type="checkbox"/>
Bank statement	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	25 ▶	<input type="checkbox"/>
Motor vehicle registration or insurance papers	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	25 ▶	<input type="checkbox"/>
Property rates notice	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	25 ▶	<input type="checkbox"/>
Property Lease agreement	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	25 ▶	<input type="checkbox"/>
Home Insurance papers	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	25 ▶	<input type="checkbox"/>
Utilities Notice	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	25 ▶	<input type="checkbox"/>
Records of primary, secondary or tertiary education	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	25 ▶	<input type="checkbox"/>
Records from a current or previous employer	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	25 ▶	<input type="checkbox"/>
Records of a professional or trade association	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	25 ▶	<input type="checkbox"/>

Category D (under 18 years of age)

A letter from an educational institution that the child attends verifying the identity of the child signed by the Principal or Administrator of that institution

A student identification card containing a copy of the seal or stamp of the institution

ADD TOTAL POINTS (must be 100 points or more) ▶

Part 10: Australia Post Use Only - Proof of Name Change (Important: Original Documents MUST be Sighted)

If the customer has had different names but produces 100 points of ID in their current name and the documents presented include either an Australian Passport or an Australian Driver's Licence, proof of name change is **NOT** required. If proof of name change is required one of the documents below must be sighted.

Marriage Certificate or extract Celebratory Certificate of Marriage Registration of name change (deed poll) Decree Nisi

Part 11: Australia Post Use Only

Confirm Date of birth sighted Photo ID sighted Current address sighted Signature Sighted

I declare the Photo ID sighted and photo presented are both a true likeness of the Applicant. I have sighted and confirmed the evidence against original documentation.

Work Centre Code Date DD MM YYYY Post Officer's Signature