



workingwithchildren

www.workingwithchildren.nt.gov.au
 Phone: 1800 723 368 (1800 SAFENT)
 Email: safent.police@nt.gov.au



WORKING WITH CHILDREN CLEARANCE - APPLICATION

For volunteers engaged in child-related work.

SAFE NT
 NT POLICE
 GPO BOX 39764
 WINNELLIE NT

Print all responses in block letters. Applicants should read and follow the directions contained within the Application Guidelines when completing this form.

OFFICE USE ONLY

Date Received / / Receipt No Lodged at
 Entered

Section A – Applicant Details

Title: Mr Mrs Miss Ms Other – please specify Sex: Male Female
 Family name/surname
 First given name Other given name/s
 Daytime contact/mobile number Email address
 Date of birth / /
 Place of birth Town / City State Country

Other Names: Have you been known by any other name? eg. name before marriage, alias, changed by deedpoll.

Maiden name OR Former name OR Also known as Given name Surname
 Former name OR Also known as Given name Surname

Please attach a separate sheet to list other names that you have been previously known as.

Postal Address

PO Box number/Street number/Street name Suburb/town State Postcode

Current Residential Address (must not be a PO Box or Business Address)

(A current residential address must be supplied in order to process this application)

Street number/Street name Suburb/town State Postcode

Section B – Previous Residential Addresses

Please list previous residential addresses **for the past 5 years**, starting with the most recent but not including your current residential address. If you cannot remember exact details, please include approximate years and town/State details. Attach a separate page if you require further space.

Street number/Street name Suburb/town State Postcode
 Date from: (dd/mm/yyyy) / / Date to: / / Country if outside Australia
 Street number/Street name Suburb/town State Postcode
 Date from: (dd/mm/yyyy) / / Date to: / / Country if outside Australia

Section C – Attach photo here

ATTACH
PHOTO
DO NOT STAPLE

A Clearance Notice will be accompanied by an "Ochre Card", that can be presented as evidence of the persons clearance to work in child-related employment. This card contains the holders photograph and unique Clearance Notice Number. Attach a passport size photo to your application. **Do not staple to the page.** See Application Guidelines or website for details on acceptable images. You do not need to attach a photo if you are lodging your application in person at SAFENT.

Section D – Purpose of check

Application type: (tick one)

New Application **OR** Renewal Previous Clearance Number

Type of child related work you will be doing as a volunteer.

Please insert the number of the category that most fits the situation that you will be engaged in while doing work in a volunteer capacity. See Application Guidelines for details.

Applicants position / brief description of role in child-related work

Please note, if you will not be working in one of the categories listed in the Application Guidelines, you may not be required to hold a working with children Clearance Check. Please contact SAFE NT on 1800723368 for further details.

Section E – Details of Volunteer Organisation

Name of Employer organisation

Postal address of organisation

Daytime Contact phone number Contact name/ Title of organisations representative

The Screening Authority may notify any person who engages you in child-related employment in a paid or voluntary capacity, if your Clearance Notice is revoked or subject to imposed conditions.

Your Clearance Notice and Ochre Card will be sent directly to your personal Postal Address. It is your responsibility to confirm details of your clearance to work with children with your employer or potential employer within the Volunteer Organisation.

To be Completed by Director or Manager of Volunteer Organisation

I certify that the person named on this form engages in volunteer work with (name of organisation) and will receive no payment, benefit or financial gain from work they undertake.

Name

Contact name/ Title of organisations representative Daytime Contact phone number

Signed

Date

Section F – Candidates/Applicants Declaration

I certify the information contained in this application is true and correct, and that I have disclosed all names, including aliases used by me now or in the past. I am aware it is an offence to give false or misleading information.

I consent to SAFE NT conducting a Working with Children Screening check on me to determine my suitability to engage in Child-related work. I understand SAFE NT will obtain information about my criminal history and any additional information relating to that record from sources which may include courts, police, prosecution agencies or previous employers. I understand that the information obtained includes, but is not limited to, details of convictions and pending charges or information relating to offences committed or allegedly committed by me, regardless of when and where the offence or alleged offence occurred.

I understand SAFE NT will make use of that information and any subsequent information about my criminal history which may be obtained to enable a full and informed assessment of risk.

I have completed this form after having read and considered the Application Guidelines.

Signed Date / /

Section G – Proof of Identity (to be completed by Qualified Person)

See Application Guidelines for list of Qualified persons.

Instructions for persons verifying identity:

- Step 1. Sight original/certified copies of documents and calculate total value using Application Guidelines. Sign only if a minimum of 100 points have been reached. Special provisions for candidates under 18 years of age are listed in Application Guidelines.
- Step 2. Complete details below of one Primary Document that is sighted.
- Step 3. Certify a copy of one piece of photographic ID to be appended to this form.
- Step 4. Sign declaration below.

Primary Document

Type of Primary Document sighted: (describe or insert number from list in Application Guidelines)

Passport/Licence/ID number

State of Issue Expiry date / /

Country of Issue

Declaration

I (insert full name) certify that I have sighted an original/certified copy of documents which belong to (insert name of candidate) ,

AND I am satisfied that at least 100 points of identification have been presented to me, including at least one primary document.

OR I am satisfied that the candidate is under 18 years and has presented the required primary document or Statutory Declaration.

Full name of Qualified person

Address - PO Box number/Street number/ Street name Suburb/town State Postcode

Daytime contact phone number

Qualification (see Application Guideline for list)

Signed Date / /

Section H – Payment Options

Please select one of the following payment options (tickbox)

Cash (over the counter transaction only) **OR** **Cheque/Money Order** (payable to RTM)

OR

Credit card (complete details below)

I authorise SAFE NT to process my payment of \$ from my Visa/Mastercard.

Cardholders name

Card number

Expiry date / /

Cardholders signature

Section I – Lodging your application form

Checklist (tick box)

- Have you completed all sections of this form
- Have you had your identification documents validated by a Qualified person
- Have you attached one photocopy of Photographic ID
- Have you attached a passport sized photograph of yourself (not required if lodging form in person at SAFE NT)
- Have you attached payment or completed the credit card authorization.

Working With Children Clearance Check application forms can be lodged in person at:

- SAFE NT
Ground Floor, 77 Smith Street Darwin
Telephone 1800 723368 / 1800 SAFE NT
Office Hours 8•30am–4•30pm Monday–Thursday
9•30am to 5•30pm Friday

- Territory Business Centre Locations

Darwin Office

Ground Floor Development House
76 The Esplanade
Telephone: +61 8 8982 1700
Facsimile: +61 8 8982 1725
Toll Free: 1800 193 111

Katherine Office

Shop 1, Randazzo Building
18 Katherine Terrace
Telephone: +61 8 8973 8180
Facsimile: +61 8 8973 8188

Tennant Creek Office

Shop 2, Barkly House
Cnr Davidson and Paterson Streets
Telephone: +61 8 8962 4411
Facsimile: +61 8 8962 4413

Alice Springs Office

Peter Sitzler Building
67 North Stuart Highway
Telephone: +61 8 8951 8524
Facsimile: +61 8 8951 8533

Or mailed to:

SAFE NT
GPO Box 39764
WINNELLIE NT 0821

Contact us:

SAFE NT
safent.police@nt.gov.au
Telephone 1800 723368 / 1800 SAFE NT
www.workingwithchildren.nt.gov.au