

# Authorisation to confirm a valid blue card/application

Organisations/employers must notify the Commission if they engage a person to provide regulated child-related services or activities who holds a blue card or has submitted a blue card application through another organisation/employer. This form enables the Commission to advise the nominated authorised person of the matters listed in the consent on this form.

## PART A Cardholder/applicant's personal details

Family name

First name/s

Middle name/s

Date of birth

 /  /   
DAY MONTH YEAR

Place of birth

Current postal address




Postcode

Daytime contact no.

Blue card number

Blue card expiry date

## PART B Authorised person's details

Name of organisation

Organisation ID number (please insert the Commission's reference number for your organisation if known)

Name of authorised person

Position

Postal address




Postcode

Telephone

Fax

Email

## Part C Child-related activity details

Please tick appropriate box  for your child related activity

Type of employment

**For paid employees (see note below)**

**For volunteers**

**For students**

Type of child-related activity

residential facilities

schools

school boarding houses

childcare

centre based service

other commercial child care services

school age care service

home based service

churches, clubs and associations

health counselling and support services

private teaching, coaching and tutoring

education programs outside of school

child accommodation including homestays

religious representatives

sport and active recreation

emergency services cadet program

school crossing supervisors

licensed care service

employee of a licensed care service

employee working for a business providing services at a licensed care service

**For family day care carers/occupants**

Type of child-related activity

family day carer

family day care adult occupant

**Note:** If you are a volunteer blue card holder transferring to child-related paid employment, **do not** complete this form. You must complete the *Volunteer to paid employment transfer* form. This form is available on the Commission's website or by calling the blue card contact centre.

## Part C Child-related activity details continued

### For business operators/self employed individuals

Type of child-related activity

health counselling and support services

private teaching, coaching and tutoring

childcare

licensed centre based service

licensed home based service

stand alone care

adjunct child care

babysitter or nanny

education programs outside of school

child accommodation including homestays

providers of recreational activities

operators of hostels for rural children

director of a governing body of a non-state school

licensed care service

religious representatives (note, you must provide details of your religious entity/group for notification purposes)

Name of entity

Contact person

Postal address

Postcode

## PART D Cardholder/applicant's consent (please read carefully before signing)

I consent to the Commission for Children and Young People and Child Guardian providing the following information to the authorised person nominated on this form:

- whether I have made an application for a blue card which is currently being processed;
- whether my blue card application has been or is subsequently withdrawn;
- whether I hold a current blue card;
- whether I have been issued with a negative notice;
- whether my blue card has been or is subsequently suspended;
- relevant information about any change in my police information which the Commissioner considers relevant to my child-related employment as provided for in the *Commission for Children and Young People and Child Guardian Act 2000*;
- notification of the final outcome of any assessment or reassessment of my application.

**Note:** making a misleading statement or providing a false document may attract a penalty under the *Commission for Children and Young People and Child Guardian Act 2000*.

Full name

Signature

Date

DAY MONTH YEAR

## PART E Organisation/employer declaration (to be completed by an authorised representative)

It is an offence to provide false or misleading information to the Commission.

I declare that:

- I am authorised to submit this application on behalf of the employer/organisation; and
- the blue card holder/applicant is proposing to start or continue in regulated employment or provide regulated services or activities; and
- an exemption does not apply; and
- I have either:
  - checked the details provided in this form and confirm they match those on the identification documents sighted; **OR**
  - delegated this responsibility to a prescribed person because the blue card holder/applicant resides more than 50km from the employer/organisation's business address or has a disability that affects his or her mobility.

**Note:** If the sighting of the documents was delegated to a prescribed person, please attach the *Identification verification by a prescribed person* form to this form.

Full Name

Signature

Position

Date

DAY MONTH YEAR

### Privacy notice

The *Commission for Children and Young People and Child Guardian Act 2000* allows the collection of personal information to assess your eligibility to be issued with a blue card.

Information will be provided to Queensland Police, and may be provided to interstate or federal police, courts, prosecuting authorities or other authorised agencies to conduct criminal history checks. Information may also be given to:

- certain disciplinary bodies to obtain relevant disciplinary information; and/or
- your employer, any supervisory body, or other person you have authorised to discuss your application on your behalf.

Personal information will only be provided to other persons or agencies where required by law.

Advice about your blue card's validity may also be provided through the Commission's online blue card verification process.

Please mail this completed document to:

**Employment Screening Services  
Commission for Children and Young People  
and Child Guardian**

**Address:**

Level 17, 53 Albert Street  
Brisbane Qld 4000

**Postal:**

PO Box 12671

Brisbane George Street Qld 4003

**Phone: 07 3211 6999 or freecall 1800 113 611**

**Fax: 07 3035 5910**

**www.bluecard.qld.gov.au**