initials:

Working with Children Check

commission for children and young people and child guardian

V

Volunteer blue card application form

The *Commission for Children and Young People and Child Guardian Act 2000* requires anyone over 18 seeking to work with children under 18 years of age in certain categories of regulated employment to obtain a blue card.

How to fill out this application form

To avoid delays in processing this application please print clearly using BLOCK LETTERS and ensure:

- the organisation/volunteer co-ordinator completes **Parts A, C and D**
- the volunteer completes **Part B**
- you indicate with a tick where required.

Applications for volunteers are processed free of charge.

Volunteers must hold a valid blue card before they commence child-related employment regulated by the Act.

Note: It is an offence for a volunteer to provide false or misleading information to the Commission or to sign an application for a blue card if they are a disqualified person# (see page 4).

PART A Organisation's Details (this section must be completed by the organisation/volunteer co-ordinator)

1 Name of organisation

Surf Life Saving Queensland

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

2 Postal address of organisation

PO Box 3747
South Brisbane QLD
Postcode: 4101

3 Contact person

John Brennan

4 Contact person's position

Executive Manager

5 Phone 07 3846 8000

Email jbrennan@lifesaving.com.au

Fax 07 3846 8008

Additional Information
The word "organisation" is taken to mean "employer" for the purposes of complying with the Act.

6 Type of child-related employment for which a blue card is sought (please tick appropriate box)

- [ ] residential facilities
- [ ] schools (other than registered teachers)*
- [ ] school boarding houses
- [ ] child care°
- [X] churches, clubs and associations◆
- [ ] health, counselling and support services
- [ ] private teaching, coaching or tutoring
- [ ] education programs outside of school
- [ ] child accommodation including homestays
- [ ] religious representatives
- [ ] sport and active recreation◖
- [ ] emergency services cadet program
- [ ] school crossing supervisors
- [ ] volunteer of the licensed care service
- [ ] volunteer working for a business providing services at a licensed care service

Note: Exemptions apply in certain circumstances, eg. a parent is exempt if they provide services:

* at the school their child attends
° at a centre where their child regularly receives child care
◆ within a church, club or association which are the same or similar to those received by their child
◖ as part of sport or active recreation involving their child

The organisation is responsible for declaring that the volunteer is not exempt (see Part D).

Applicant's Name

PART B Volunteer's Details

(this section must be completed by the volunteer)

7 Have you ever applied for or held a blue card?

☐ Yes ☐ No

Blue card No. (if known) ____

8 Your title Mr ☐ Mrs ☐ Miss ☐ Ms ☐

Other ____

9 Name you presently use

Family Name ____

First Name ____

Middle Name ____

I do not have a middle name (please tick) ☐

10 Do you currently use an abbreviation/nickname/alias for your first name? *eg. Elizabeth abbreviation Betty*

Name/s ____

11 Have you ever been known by any other name/s?

This includes:

- name at birth
- change following divorce
- maiden name (name before marriage)
- change the order of your name (eg. known by middle name)
- married name
- alias
- change by certificate/ deed poll
- different first/middle name (eg. different abbreviations)

Note: It does not matter how long ago you changed your name or how long you used another name for.

(Please tick) No ☐ Go to question 12

Yes ☐ ▶ give details below:

If you require more space, please tick this box ☐ and attach a separate list

Family Name ____

First Name ____

Middle Name ____

Reason for change ____

12 Are you

☐ Male ☐ Female

13 Date of birth ___ / ___ / ___ (DAY MONTH YEAR)

14 Place of birth

Town/city ____

State ____

Country ____

15 Current postal address

(**Note:** your postal address must be in Australia)

____

____

Postcode ____

16 If you have lived at a different address in the last 5 years, please detail on a separate sheet of paper and tick this box ☐

17 Your telephone numbers

Daytime ____

After hours ____

Mobile ____

18 Do you identify as? (please tick)

☐ Aboriginal ☐ Torres Strait Islander

☐ Aboriginal and Torres Strait Islander

☐ Australian South Sea Islander

☐ Other (specify) ____

19 What language do you mainly speak at home?

☐ English ☐ Other (specify)

____

20 Are you, or have you ever been, any of the following in Queensland (please tick the appropriate box/es):

☐ registered teacher

☐ carer approved by Dept of Communities (Child Safety Services)

☐ registered health practitioner

☐ registered or enrolled nurse or midwife

☐ licensee of a child care service

☐ director or nominee of a care service licensed by the Dept of Communities (Child Safety Services)

☐ director of a school's governing body

21 Volunteer's declaration

Note: It is an offence for a disqualified person to sign a blue card application.# (see page 4)

I declare:

- the information and identification documents provided for this application are true and correct;
- that I am proposing to undertake regulated employment and am not entitled to an exemption;
- I am aware of my obligations as a blue card applicant/card holder;
- that I am not a disqualified person# (see page 4);
- I consent to the Commission obtaining information from police, courts, prosecuting authorities and other bodies under Part 6 and to publishing/providing confirmation on whether or not my blue card is valid.

Sign inside the box as your signature will be scanned.

Date of signature ___ / ___ / ___ (DAY MONTH YEAR)

Applicant's Name ____

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PART C Proof of Identity Declaration

(this section must be completed by the organisation/volunteer co-ordinator)

The organisation/volunteer co-ordinator is responsible for sighting the volunteer's identification documents.

However, in limited circumstances (where the volunteer resides more than 50km from the organisation's business address or has a disability that affects his or her mobility), this responsibility can be exercised by a prescribed person.

A prescribed person is a Justice of the Peace, Commissioner for Declarations, Lawyer or Police Officer.

Irrespective of whether or not the organisation/volunteer co-ordinator can sight the identification documents, they must complete Part D.

Where the organisation/volunteer co-ordinator is **unable** to sight the identification documents, a prescribed person must sight them and complete **Parts C and E.**

Identification requirements

The volunteer must produce two original identification documents to confirm their identity. Together the documents must show:

- full name
- date of birth
- signature

The organisation/volunteer co-ordinator must certify in **Part D** that the details provided on the application form are the same as those appearing on the documents sighted.

One of the following combinations must be used:

EITHER

List 1 + **List 2**

One original document from List 1 and one original document from List 2 which together show the volunteer's **full name, date of birth and signature.**

OR

List 1 + **List 1**

Two original documents from List 1 which together show the volunteer's **full name, date of birth and signature.**

Note: All identification documents sighted must be originals (photocopies are not acceptable).

Where any document is in a former name, an original official document (eg. marriage certificate or change of name certificate) showing the change of name must be sighted.

Note: If you cannot provide an identification document from either List 1 or List 2 please contact the Commission on **07 3211 6999 or 1800 113 611.**

If possible, please attach a photocopy of documents sighted to this application form for verification purposes.

Please indicate which identification documents have been sighted by placing a ☑ in the box.

22 LIST 1

Signature Document

☐ Current driver licence/learner's permit/ proof of age card (with photo)

Document No: _____

Issued in the state of: _____

☐ Current passport (with photo)

Passport No: _____

Non-Signature Document

☐ Birth certificate (or extract)

Reference No: _____

☐ Australian citizenship certificate or current document evidencing permanent Australian residency status

Reference No: _____

23 LIST 2

Signature Document

☐ Current Pension Concession Card/Dept of Veterans' Affairs Entitlement Card/Senior's Health Card /Health Care Card/any other current financial entitlement card issued by Centrelink.

☐ Current Credit Card or account card from a bank/building society/credit union (with name and signature)

☐ Current Positive Notice Blue Card (issued by the Commission)

☐ Current student identification card issued by a tertiary education institution or school (with photo and signature)

☐ Current Qld Gaming Machine Licence

☐ Current Qld Licence issued under the Weapons Act

Non-Signature Document

☐ Current Medicare card

☐ Current Qld crowd controller/private investigator/ security officer licence

☐ Passbook or account statement issued by a bank/building society/credit union dated in the last 6 months

☐ Australian taxation assessment notice dated in the last 6 months

The organisation/volunteer co-ordinator must complete **Part D.**

Where the organisation/volunteer co-ordinator is **unable** to sight the identification documents, a prescribed person must sight them and complete **Parts C and E.**

Applicant's Name _____

PART D Declaration by Organisation/ Volunteer Co-ordinator

(to be completed by the organisation/ volunteer co-ordinator)

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 organisation; and
- the volunteer is proposing to undertake regulated employment and an exemption does not apply; and
- I have warned the volunteer that it is an offence for a disqualified person to sign a blue card application.

Please tick appropriate box ☑

☐ I have checked the details provided in this form and confirm they match those on the identification documents sighted.

OR

☐ I am unable to sight the identification documents because:

- the volunteer's usual residence is more than 50km from the business address, or
- the volunteer has a disability affecting his or her mobility.

Note: It is an offence not to warn the volunteer that it is an offence for a disqualified person to sign a blue card application.

Full Name

Signature

Position

Date / / (DAY MONTH YEAR)

PART E Declaration by Prescribed Person

(to be completed by a prescribed person)

I declare I have checked the details provided in this form and confirm they match those on the identification documents sighted.

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

I am a:

☐ Justice of the Peace

☐ Commissioner for Declarations

☐ Lawyer

☐ Police Officer

Stamp or Registration No. (if applicable)

Signature

Full Name

Date / / (DAY MONTH YEAR)

Privacy notice

The *Commission for Children and Young People and Child Guardian Act 2000* allows us to collect your personal information, which is accessed by Commission staff to assess your application for a blue card.

Some of this information goes to Queensland Police, and may be sent to interstate or federal police to conduct criminal history checks. Information may also be given to:

- certain disciplinary bodies to get relevant disciplinary information about you
- your employer, any supervisory body, or other person you have authorised to discuss your application on your behalf. This enables us to update them on your blue card application and any changes to your blue card status.

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

Personal information will not be given to any other person or agency unless we have your permission or the disclosure is authorised or required by law.

Important information

You can withdraw your consent to screening at any time before a decision is made.

#Disqualified people

It is an offence for a disqualified person to sign a blue card application form.

A disqualified person is someone who:

- has been convicted of a disqualifying offence, *ie. a guilty finding or guilty plea, whether or not a conviction was recorded.* This may include a child-related sex or pornography offence or the murder of a child (irrespective of the penalty and regardless of when and where it occurred);

OR

- is the subject of:
  - reporting obligations under the *Child Protection (Offender Reporting) Act 2004*
  - an offender prohibition order under the *Child Protection (Offender Prohibition Order) Act 2008*, or
  - a disqualification order issued by a court prohibiting them from applying for or holding a blue card.

A disqualified person can apply to the Commission to be declared eligible to apply for a blue card in certain limited circumstances.

For more about blue card information and obligations go to www.bluecard.qld.gov.au

Please mail this completed form to:

Surf Life Saving Queensland
PO Box 3747
South Brisbane Qld 4101

Phone: 3846 8000
Fax: 3846 8008

Applicant's Name

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