

**package of forms FOR**

**entry-level probity checkS**

**Locally Employed Staff (LES)**

**And**

**INTERNS**

**NOTES**

**Prospective LE and Interns:  
Australian Police Check:**

If the prospective LE or Intern has **not** **resided in Australia during the previous six months**, the Australian Police Check is not compulsory.

**Local Police Checks:**

Post should undertake local police checks in all countries of residence for six months or more where practical

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**LOCALLY ENGAGED STAFF/ INTERN**

**Photograph**

**PERSONAL DETAILS**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**A. BIOGRAPHICAL DETAILS** (For completion by the new employee)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

FAMILY NAME: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

MAIDEN OR OTHER NAME(S): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

GIVEN NAME(S): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Latin script) **[see note (b)]** (Original script)

ALSO KNOWN AS: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ GENDER: \_\_\_\_\_\_\_\_\_

PLACE AND DATE OF BIRTH: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ / /

NATIONALITIES: Present \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ At birth \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Dual national?

**[note (c)]** YES NO

MARITAL STATUS: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Single/Married/Separated/Divorced/etc.) [circle]

**FATHER**

NAME OF FATHER: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

FATHER'S PLACE AND DATE OF BIRTH: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ / /

FATHER'S NATIONALITY: Present \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ At Birth \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**MOTHER**

NAME OF MOTHER: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ NEE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

MOTHER'S PLACE AND DATE OF BIRTH: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ / /

MOTHER'S NATIONALITY: Present \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ At Birth \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**SPOUSE**

NAME OF SPOUSE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ NEE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

SPOUSE'S PLACE AND DATE OF BIRTH: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ / /

SPOUSE'S NATIONALITY: Present \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ At Birth \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

SPOUSE'S EMPLOYER: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**CHILDREN**

NAME(S) OF CHILDREN: PLACE OF BIRTH: DATE OF BIRTH: NATIONALITY

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ / / \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ / / \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ / / \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ / / \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ / / \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**MILITARY SERVICE**

PERIOD: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ COUNTRY \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

details: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**B. EMPLOYMENT DETAILS** (For completion **by the post administration**)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

PN: \_\_\_\_\_\_\_\_\_\_\_ DESIGNATION/DUTIES: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

LEVEL OF ACCESS: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Nil/Satin Low/etc.)

METHOD OF RECRUITMENT:  **[note (d)]**  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

SALARY PAID BY: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_   
(Mission/Host Government/Attached agency/ Other)

DATE COMMENCED: / / DATE TERMINATED: / /

REASON FOR TERMINATION: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

COMMENTS ON PREVIOUS EMPLOYMENT:  **[note (e)]**  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**C. ASSOCIATION WITH AUSTRALIA** (For completion by non Australian citizens with previous or continuing contact with Australia)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

NAME OF FEDERAL ELECTORATE IN WHICH ENROLLED: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

DETAILS OF FIRST ARRIVAL IN AUSTRALIA: Date: / /

Place: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Ship/Flight: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

PERMANENT RESIDENCE STATUS IN AUSTRALIA? YES / NO [Circle]

DETAILS OF PREVIOUS RESIDENCE IN AUSTRALIA:

From / / to / / at \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

From / / to / / at \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

DETAILS OF PROPERTY HELD IN AUSTRALIA: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

FAMILY LIVING IN AUSTRALIA: (Parents, siblings, children)

Name Relationship Address

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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I hereby declare that to the best of my knowledge and belief the information provided on this form is a true and complete statement of the matters set forth herein.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ [Signature]

WITNESS: Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

[Must be an

Australia- Designation: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

based Officer]

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: / /

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Personal Details : Notes**

(a) GENERAL: This form must be completed for all locally engaged staff and interns who are not in Designated Security Assessment Positions—except family members of   
Australia-based staff.

(b) TRANSLITERATED NAMES: If the original name is in another script this should be shown together with the English equivalent. For Chinese names the Chinese Commercial Code is sufficient for this purpose.

(c) NATIONALITY: Present nationalities as well as any previous nationalities.

(d) RECRUITMENT METHOD: Show whether recruitment was by local press advertisement, allocation by the Host Government or other authority, or by unsolicited application. Note whether applicant was interviewed/engaged on the recommendation of any particular individual or body, and whether his/her employment required the approval of any authority of the Host Government. Show also the reason why the position was vacant.

(e) PREVIOUS EMPLOYMENT: Especially any previous employment by other Missions and/or local or foreign Government authorities. Note the duration of such employment and details of position(s) held.



**CONSENT TO CONDUCT ENQUIRIES**

I, , (Full name) hereby consent to the conduct of any enquiries (including with local police) which the Australian Department of Foreign Affairs and Trade or any Australian Embassy, High Commission or Consulate-General may deem necessary in order to fulfil its responsibilities in respect of my employment at the Australian (Mission's name) in  
 (City).

Given at the Australian (Mission's name) in (City)

on the day of , 20 .

(Signature)

Witnessed by: Name: (Full name)

Position: (Local designation)

(Signature)

|  |  |
| --- | --- |
|  | FINANCIAL SERVICES |
|  |  |
| Locked Bag 8550 CANBERRA ACT 2601  Telephone 02 6202 3333  Email:Vetting@afp.gov.au  www.afp.gov.au  ABN 17 864 931 143 | |

**Application Completion Guide**

**BLOCK LETTERS MUST BE USED WHEN COMPLETING THIS APPLICATION MANUALLY**

**Section 2: Applicant details**

Please ensure ALL applicant details are provided including all current and previous names, telephone contact numbers, drivers licence details etc.

If there is insufficient room, please attach a separate sheet, ensuring that it is signed and dated.

**Section 3: Employer/Organisation details**

This section relates to AFP account holders only and should not be used unless previously advised.

**Section 4: Mailing Address of Police Certificate**

The National Police Certificate will be mailed to the organisation listed at Section 3.

**Section 5: Fingerprint Checks** are only required where there is a legislative requirement for such a check to be conducted. The employer or organisation requiring the NPC will advise you if this is necessary.

**These fingerprints must be included with pages 1 and 2 of this form at the time of submission**.

An additional cost and processing time is associated with this service. Details are available on the AFP website or use the link – http://www.afp.gov.au/business/national\_police\_checks.html

Fingerprints can be taken by your local police jurisdiction or the AFP. Where fingerprints are taken by the AFP and the AFP charges for this service a receipt must be obtained and supplied to Criminal Records with this application.

**Section 6: Consent**

This section must be signed by the applicant. If a parent/guardian has signed in the consent section they consent to the AFP conducting a NPC on their son/daughter/ward.

**Spent Convictions Legislation**

The aim of spent convictions legislation is to prevent discrimination on the basis of certain previous convictions. Spent convictions legislation limits the use and disclosure of older, less serious convictions and findings of guilt.

There are some offences excluded from being spent where the check is required for certain purposes – these offences will be released regardless of how old they are.

Where a record exists within an Australian police jurisdiction, relevant spent conviction legislation/policies governing the release of that information for that jurisdiction will be applied. As a result certain convictions will not be released provided this is in accordance with the relevant legislation/policies.

For Commonwealth records the AFP applies the provisions within *Part VIIC of the Crimes Act 1914* and for ACT records provisions within the ACT *Spent Convictions Act 2000* are applicable*.*

If further information or clarification is required please contact the individual jurisdiction where the record is held.

**Provision of False or Misleading Information**

You are asked to certify that the personal information you have provided on this form is correct. Where your check is for employment related purposes and the result is to be provided to your employer or other organisation, discovery of any false or misleading information may be reported by the AFP and may impact on the decision being undertaken by the employer or organisation.

The AFP provides information, with your consent, to the employer or organisation but takes no part in any subsequent assessment.

**Disputed Record Enquiries**

If you believe the information provided on your police certificate is incorrect or inaccurate a Disputed Record form (CR 1200) is available from the AFP website. This form should be forwarded to the AFP through the agency or organisation with whom you have lodged your application for a National Police Check.

Include any additional information or documents supporting your enquiry to enable the AFP to more accurately assess your application. In some instances the AFP may require comparison fingerprints to resolve some disputes. Applicants will be notified in such instances.

**The Privacy Commissioner** is responsible for ensuring the protection of private information relating to individuals. This includes investigating instances where information has been released improperly or incorrectly. An individual who believes the standards dealing with disclosure and use of old conviction information have been breached may apply to the Privacy Commissioner for an investigation of the matter. The phone number is 1300 363 992.

The following requirements must be met when submitting an AFP National Police Check (NPC).

**Australian Federal Police**

Office use only

**National Police Check (NPC) Application Form**

Please complete this form by referring to the *Application Completion* *Guide.*

**1. Purpose of NPC**

|  |  |
| --- | --- |
| **Code Number:** | 30 |

**Enter the relevant code number from the table at Section 1: Purpose of NPC on the Application completionGuide** (e.g. Fire fighting/prevention = Code No 15)

**If a code is not specified this application will be processed as a Standard Disclosure (Code 30).**

If the purpose is not listed or you are unsure please ring the AFP Criminal Records Help Desk on 02 6202 3333 for assistance.

**2. Applicant Details**

Use **BLOCK LETTERS** and **black ink**. Mark check boxes with a cross (X).

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Current Family Name** | | |  | | | | | | | | | | | | | | | |
| **All Given Names** | | |  | | | | | | | | | | | | | | | |
| **Date of Birth (DD/MM/YYYY)** | | | /    / | | | | | **Gender: Male** | |  | | **Female:** | | |  | | | |
| **Previous or Other Names** by which you are known or have been formerly known must be listed below (eg. maiden, deed poll).  If more room is required, list on separate sheet, sign and send with this application form. Additional information sheet included | | | | | | | | | | | | | | | | | | |
| **Family Name: (include all name changes and maiden name)** | | | | | | **Given Names** | | | | | | | | | | **Date of Birth** | | |
|  | | | | | |  | | | | | | | | | | /    / | | |
|  | | | | | |  | | | | | | | | | | /    / | | |
| **Place of Birth Town** | |  | | | | | | | | | | | | | | **State** | |  |
| **Country** |  | | | | | | | | | | | | | | | | | |
| **Telephone Numbers: Home** | | | |  | | | **Work** | |  | | | | **Mobile** | |  | | | |
| **Australian Drivers Licence Number** | | | | |  | | | | | | **Issuing State:** | | |  | | | **Copy Attached** | |

**Current Residential Address – Complete in FULL**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Unit No.** | **Street No.** | | **Street Name / Street Type** | | |
|  |  | |  | | |
| **Suburb/City** | | | | | **Post Code** |
|  | | | | |  |
| **State** | | **Country** | | **Residency From** | |
|  | |  | | /    / | |

**Previous Residential Address – Complete in FULL**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Unit No.** | **Street No.** | | **Street Name / Street Type** | | |
|  |  | |  | | |
| **Suburb/City** | | | | | **Post Code** |
|  | | | | |  |
| **State** | | **Country** | | **Residency From** | |
|  | |  | | /    / | |

**3. Employer/Organisation Details (For use by AFP Account holders only)**

|  |  |  |
| --- | --- | --- |
| **Organisation/employer name** | **Client Code:** | **Client Reference Number** |
| DFAT | 32 | N/A |

**4. Mailing Address for Police Certificate**

**The National Police Certificate will be posted to the account holder listed at Section 3 of this application.**

**5. Fingerprints** Please note that a fingerprint check is only required under very limited circumstances. Please ensure that you are actually required to have a fingerprint check conducted *before* going to the expense of this level of check by checking with the organisation/department requesting the check.

**6. Consent**

1. I acknowledge I have read the *Application Completion Guide* for this application form (pages 3 – 6) and I am aware exclusions from spent convictions legislation may apply to some categories of NPCs.
2. The personal information I have provided on this form (including fingerprints if supplied) relates to me and is correct.
3. I acknowledge the details contained on this form, including fingerprints where relevant, will be forwarded to the AFP, CrimTrac, and/or the Police Services of the States or Territories of the Commonwealth of Australia.
4. I consent to the AFP and any other Australian police force extracting details of any convictions, findings of guilt or pending court proceedings relating to me, including in relation to any traffic offence, and providing that information to me or to the Employer/Organisation named in Section 3 above, as approved or to another person agency as named in Section 4.
5. I acknowledge the information provided on this form will not be used without my prior consent for any other purpose, unless otherwise authorised by law.
6. I acknowledge that any information provided on this form or disclosed by the police as a result of the records check may be taken into account by the organisation mentioned in (3) above or any organisation to whom I present the results of the records check in assessing my suitability to receive the entitlement.

|  |  |  |  |
| --- | --- | --- | --- |
| **Applicant’s Signature** | **Signature** | **Date** | / / |

**If you are under 18 years of age please provide consent below from a parent/guardian.**

|  |  |  |  |
| --- | --- | --- | --- |
| **Parent/Guardian Signature** | **Signature** | **Date** | / / |
| **Parent/Guardian name printed in full** | | | |
|  | | | |

# 100 POINT CHECK - REQUIREMENTS

You are required to provide 100 points of identification, including at least one item with a recent photograph. Acceptable documents and their value are listed below.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**PRIMARY DOCUMENT (ONE ONLY) 70 POINTS**

Name verified from one of the following:

* Birth Certificate
* Birth Card issued by the New South Wales Registry of Births, Deaths and Marriages
* Citizenship Certificate
* International Travel Document
  + a current passport
  + expired passport which has not been cancelled and was current within the preceding two years
  + other document of identity having the same characteristics as a passport (e.g. this may include some diplomatic documents and some documents issued to refugees)

**Note:** Do not score additional points for more than one document from this category.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**SECONDARY DOCUMENT 40 POINTS**

Name and signature verified from one of the following (but only where they contain a photograph or signature that can be matched to the signatory):

* A license of permit issued under a law of the Commonwealth, a State or Territory (e.g. an Australian driver’s licence)
* An identification card issued to a public employee
* An identification card issued by the Commonwealth, a State or Territory as evidence of the person’s entitlement to a financial benefit
* An identification card issued to a student at a tertiary education institution

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**SECONDARY DOCUMENT 35 POINTS**

Your name and address verified from any of the following:

* Your current employer, or a previous employer within the last two years
* A rating authority (e.g. land rates)
* The Credit Reference Association of Australia (subject to the *Privacy Act 1988*) or equivalent
* Land Titles Office or equivalent Records

**REFEREE DETAILS**

Please list three people of mature judgement, who are not relatives, and who have known you for at least the past two years. It is preferred one be a supervisor, not personal referee.

(Please print clearly and ensure name and address are spelt correctly)

1. Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Occupation: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

How long known: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Nature of acquaintance: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Postal or email address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~**

2. Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Occupation: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

How long known: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Nature of acquaintance: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Postal or email address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~**

3. Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Occupation: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

How long known: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Nature of acquaintance: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Postal or email address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_



**DECLARATION OF SECRECY**

I, ............................................................................, hereby undertake to observe strict secrecy regarding all matters connected with my employment with the Australian Embassy/High Commission/Consulate-General/Consulate *(delete those which do not apply),* and I undertake not to reveal during the period of my employment or at any time thereafter any of the matters which may come to my knowledge in the course of my employment or the discharge of my duties except to Australia-based officers of this Embassy/High Commission/Consulate-General/Consulate *(delete those which do not apply),* or otherwise when required by the Head of Mission or Senior Administrative Officer to do so.

I have accepted my present employment on the understanding that any breach of this undertaking will render me liable to dismissal without notice or any payment in lieu thereof and may render me liable to penalties attendant on such offences.

Given at the Australian ..........................................., ..............................,

on the .......................................... day of .............................. 20 .

Signature:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Witnessed by: Name: ....................................................

Position: ....................................................

Signature:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

# Schedule of requirements

**Forms in this package**

✍ Completed *Personal details* Completed 

✍ Completed *Consent to conduct enquiries* Completed 

✍ Completed forms for *Australian police check* Completed /Not applicable 

✍ Completed *Declaration of secrecy* Completed 

✍ Completed *Referee details* Completed 

**Attachments**

🖂 Full birth certificate#  Attached \*

🖂 Change of name certificate(s) [eg. deed poll] #  Attached  Not applicable 

🖂 Naturalisation/citizenship certificate(s) #  Attached  Not applicable 

🖂 Marriage certificate(s)#  Attached  Not applicable 

🖂 Divorce documents #  Attached  Not applicable 

🖂 Driver’s licence#  Attached  Not applicable 

🖂 Most significant education history and qualifications Attached  Not applicable 

🖂 Passports, current and expired Attached  Not applicable 

*[ie all passports held whether issued by Australia*

*or any other country, or identity documents issued*

*by an Australian immigration official]*

🖂 Evidence of previous employment during the past Attached  Not previously 

three years employed

🖂 Armed service discharge certificate Attached  Not applicable 

*[pertaining to service in the Defence forces of any country]*

🖂 Four recent photographs (passport size) Attached 

**# Certified copies of these identity documents may be provided.**