

Important Notice

Blue card application

Working with Children (Risk Management and Screening) Act 2000

This form is to be completed by paid employees, volunteers and students proposing to start or continue in child-related employment.



Valid for lodgement until 30 June 2018

If you are eligible to apply for a blue card (please see disqualified person * definition on page 4), continue to complete this application. If you are not eligible, do not complete this form and complete an Eligibility Declaration form instead.				
Part A – Child related activity details (to be completed by the organisation)	Part C - Category of child related activity (to be completed by the organisation)			
Please select the type of child-related employment for which a blue card is required:	Information about categories of child-related employm and whether any exemptions apply is available from www.bluecard.qld.gov.au.			
Paid employee (payment details required in Part G) Volunteer (no payment required)	Please select the type of child-related activity to which the employment relates:			
Student (no payment required)	Child accommodation services including home stays			

	Yes No			
Part B – Organisation details (to be completed by the organisation)				
1	Name of organisation			
2	Organisation ID number (if known)			
3	Postal address of organisation			
	Postcode			
4	Contact person's name			
5	Contact person's position			
6	Telephone			
7	Email			

Is this application associated with NDIS?

employ C C C C C C C C C E C C A A B B H H	select the type of child-related activity to which the yment relates: child accommodation services including home stays thild care (including education and care) churches, clubs and associations ducation programs conducted outside school suspended or excluded students or flexible rrangements under the Education (General Provisions) Act 2006) mergency services cadet program lealth, counselling and support services
CC	child care (including education and care) churches, clubs and associations ducation programs conducted outside school suspended or excluded students or flexible rrangements under the Education (General Provisions) Act 2006) mergency services cadet program
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	lealth, counselling and support services
(I	including disability services)
L	icensed care services
	ocal Government
P	aid private teaching, coaching or tutoring
R	eligious representatives
R	esidential facilities
S	chool boarding houses
S	chool crossing supervisors
S	chools (other than registered teachers and parents)
S	port and active recreation

OFFICIAL USE ONLY		
Receipt number:	Date:	Initials:



Pa	rt D – Applicant's details (to be completed by the applican	nt)
1	Title Mr Mrs Miss Ms	Previous blue/exemption card number (if applicable):
2	Full legal name	13 Are you, or have you ever been a: (please tick)
_	Family name	Foster or kinship carer
	First name	Health practitioner
	Middle name	Operator/supervisor/carer of a child care
	No middle name (please tick)	or education service
_	Do you have a previous name, or have you been known	Teacher
3	by any other name?	14 Applicant's declaration
	Yes (record details below) No	I declare that:
	It does not matter how long ago you used the name	 I have read the information on page 4 and I am not disqualified from applying for a blue card#;
	or how long the name was used for e.g.	I am the applicant named in this form and have not
	• birth name • name before marriage • married name	omitted any names or aliases that I use or have used
	aliaschange by certificateadoptionchanged order of name	in the past;
	Family name	 the information and identification documents provided by me for this application are true and correct and
	First name	I understand it is an offence to provide a false or
	Middle name	misleading statement or document;
	If you require more space, please tick this box	 I consent to information from any police, court, prosecuting authority or other authorised agency being
	and attach a separate list.	obtained and for the police, courts, prosecuting authority
	Gender	or other authorised agency to disclose any information for the purposes of assessing my eligibility to work with
4	Gender	children including ongoing checks while my application/
5	Date of birth	blue card remains current;
6	Place of birth	 I understand that the information obtained includes but is not limited to details of convictions[^] and
	Town/City	pending or non-conviction charges* or information on
	State/Territory State/Territory	the circumstances relating to offences committed or
	Country	allegedly committed by me, regardless of when and where the offence or alleged offence occurred;
7	Current postal address (within Australia)	 I understand my organisation will be advised whether or
′	(Within Australia)	not I have a current application for, or hold a current blue/ exemption card; the outcome of this application which
		may include whether my application is withdrawn, or a
	Postcode	negative notice issued, or if my blue/exemption card is
_		subsequently suspended or cancelled; • I am proposing to start or continue in regulated
8	Current residential address (if different to above)	employment and am not entitled to an exemption;
		 I understand and will comply with my blue card
	Postcode	obligations as a blue card applicant/cardholder; and
		 I consent to confirmation of the validity of my blue card being published or provided.
9	Telephone number	Sign inside the box.
	Daytime	Please do not touch or go outside the lines.
	Mobile	
10	Email	
11	Do you identify as? (if applicable)	
	Aboriginal Torres Strait Islander	Date of signature
	Aboriginal and Torres Strait Islander	D D M M Y Y Y Y
	<u> </u>	

	ıt, original	iden	tification (doc	uments from the applicant which collectively show the applicant's eir identification documents must match the details provided in		
One of the following combinations m	ust be use	ed: E	ITHER				
	List 1	+	List 1	(o	ne must show a signature)		
		OR		,			
	List 1	+	List 2	(0	ne must show a signature)		
If one of the valid identification combalternative identification' form.	If one of the valid identification combinations above cannot be provided, complete and attach a 'Request to consider alternative identification' form.				provided, complete and attach a 'Request to consider		
If the applicant resides more than 50 submit an 'Confirmation of identity' f		ne oi	rganisatio	on o	or has a disability which affects their mobility, complete and		
Please indicate which identification of	document	s ha	ve been s	igh	ted by placing a $oxdot$ in the box.		
LIST 1 SIGNATURE DOCUMENT					LIST 2 SIGNATURE DOCUMENT		
Driver licence/learner permit/proof of age card Licence No: Issued in the state of:					Pension Concession card/Department of Veterans' Affairs Entitlement card/Seniors Health card/Health care card/ any other current financial entitlement card issued by Department of Human Services.		
Australian Passport (current or ex	pired in th	e las	st 2 years)		Credit card or bank card (do not attach copy)		
NON-SIGNATURE DOCUMENT					Positive Notice Blue or Exemption card		
Birth certificate (or extract)			idency		Student identification card issued by an education institution (with photo and signature) Queensland Gaming Machine Licence		
Proof of Australian citizenship or permanent residency			idericy		NON-SIGNATURE DOCUMENT		
Overseas Passport (current)		٦	Medicare card				
Country of issue:		_	Queensland crowd controller/private investigator/ security officer licence				
					Passbook or account statement issued by a financial institution dated in the last 6 months		
					Australian taxation assessment notice dated in the last 6 months		
					Queensland Licence issued under the Weapons Act 1990		
If possible, please attach a photocop	y of the d	ocur	nents sig	hte	d for verification purposes (excluding credit or bank cards).		
Part F – Organisation declaration (to	o be comp	olete	ed by the	org	anisation)		
	be compl	eted	<u> </u>		nisation's representative irrespective of whether or not the		
• I understand that it is an offence to provide a false or misleading statement or document;							
 I am authorised to submit this application on behalf of the organisation; the applicant is proposing to start or continue in regulated employment and an exemption does not apply; 							
• I have warned the applicant that it is an offence for a disqualified person to sign a blue card application (see page 4)#; and							
 I have either: checked the details provided in this form and confirmed they match those on the identification documents sighted; or delegated this responsibility to a prescribed person and have attached the 'Confirmation of identity' form. 							
- , , , ,	•	•			for a disqualified person to sign a blue card application.		
					Name of representative		
Signature of representative				J			
Date of signature DDD MMM	Y Y	Y Y			Position of representative		

Privacy notice

The Working with Children (Risk Management and Screening) Act 2000 allows the collection of personal information to assess your eligibility to be issued with a blue/exemption card.

Information will be provided to Queensland Police, and may be provided to police, courts, prosecuting authorities or other authorised agencies as part of the screening process. 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 with your permission or where required by law.

Important information

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

***Disqualified person**

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, which includes having sex with a child (irrespective of the type of relationship e.g.
 teenage boyfriend/girlfriend, unlawful carnal knowledge) or other child-related sex or pornography offences or the murder of a child
 (irrespective of the penalty and regardless of when and where it occurred); or
- is the subject of:
 - o reporting obligations under the Child Protection (Offender Reporting) Act 2004; or
 - o an offender prohibition order under the Child Protection (Offender Prohibition Order) Act 2008; or
 - o a disqualification order issued by a court prohibiting them from applying for or holding a blue card; or
 - o a sexual offender order under the Dangerous Prisoners (Sexual Offenders) Act 2003.
- *Non-conviction charge means, whether a person was charged as an adult or a child, a charge: that has been withdrawn; that has been the subject of a nolle prosequi, a no true bill or a submission of no evidence to offer; that led to a conviction that was quashed on appeal; or upon which a person was acquitted or disposed of by a court otherwise than by way of conviction.
- ^Conviction/convicted means a finding of guilt by a court, or the acceptance of a plea of guilty by a court, whether or not a conviction is recorded and regardless of when and where it occurred.

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

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

Application lodgement

Applications may be lodged by one of the following methods:

Scan and upload www.bluecard.qld.gov.au/uploadform



PO Box 12671, Brisbane George Street QLD 4003

In person
53 Albert Street, Brisbane QLD 4000

By fax

07 3035 5910

Applicant's name DJAG 001.V2 JUN17

Part G – Payment options for PAID employees only The application fee is GST exempt (under division 81), non refundable and subject to change.			
An \$87.20 fee is required for paid employees. Please select one of the following payment methods:			
Credit card—complete payment online at www.bluecard.qld.gov.au			
Receipt number Date payment made Date payment made			
To avoid delays in processing, please attach a copy of the receipt when paying by credit card and ensure all applicant details match those on this form.			
Cash or EFTPOS (over the counter transaction only)			
Cheque/Money order—made payable to Blue Card Services (ABN 60 789 586 626)			
Postal address for receipt (must be completed if the receipt is to be sent to someone other than the applicant)			
Postcode			
Email address for receipt			

Blue Card Services, Department of Justice and Attorney-General

- ① Scan and upload at www.bluecard.qld.gov.au/uploadform
- PO Box 12671, Brisbane George Street QLD 4003
- â 53 Albert Street, Brisbane QLD 4000

- **(**) 07 3211 6999 or 1800 113 611
- Fax 07 3035 5910
- www.bluecard.qld.gov.au