

**National Police History Policy & Authority Form**

Chandler Personnel aims to maintain high standards of professional conduct and ensure all employees are suitable for their role. To assist us to comply with our obligation to ensure a safe workplace, all persons wishing to be employed by Chandler Personnel on a casual or permanent basis are required to undertake a police check prior to commencement. Chandler Personnel *will* accept previously completed Police Checks, so long as they are within 3 years of the commencement date.

|  |                   | YES | NO   |
|--|-------------------|-----|------|
| Do you have any prior or pending criminal history? |                   | P1  | P2 X |
| If so, give details: P3                            |                   |     |      |
| DATE   | NATURE OF OFFENSE |     |      |
| P4   | P5                |     |      |
| P6   | P7                |     |      |

All persons who do *not* have a previously completed Police Check have the following options below.

**Please tick the most suitable box, and provide signatures where required.**

T1 **Option 1:** I hold a previously completed National Police Check (within 3 years)

☒ **Option 2:** I have completed the enclosed Application Form and provided sufficient ID so that Chandler Personnel can conduct a National Police Check on my behalf \*(sign below)

**\*FOR OPTION 2 ONLY\***

I ~~N1~~ give authority to Chandler Personnel to conduct a  
hh hhhh (full name)

National Police Check on my behalf, *\*once I commence employment\**. I understand that I am responsible for the payment of this Police Check, and that an amount of \$49.00 will be deducted from my first pay.

  
(signature)

hh hhhh  
(full name)

10/10/2024 20  
(date)

**\*NB: This deduction is ONLY for candidates who are successful past the interview stage and begin casual or permanent employment through Chandler Personnel.**

**\* If the candidate is *not successful* (for any reason) Chandler Personnel will *not* conduct the Police Check, nor will there be any costs for the candidate.**

**-- OFFICE USE ONLY--**

| Approving Consultant/Manager | Signature | Date |
|------------------------------|-----------|------|
|                              |           |      |
|                              |           |      |