

CONSENT TO CHECK AND RELEASE NATIONAL POLICE RECORD

Office Use Only Result: Checks: Our Ref No:					Our Ref No:					
VICTORIA POLI		omoc osc omy	Vic: Others:			1. S&GN&NNI				
			Initials:			2. S&DOB&NI 3. PH&NNI	NI		Your Ref No:	
Before completing this form, please read instructions on the reverse. Complete in ink ONLY.										
SECTION 1: APPLICANT DETAILS:										
Family Name:					Siven lames:					
Previous or alternative names (see Section 5):										
Family Name:					Siven lames:					
Current Residential Address:										
Daytime Telephone No:			Date o	f	/ ,	,	Place of Birth:			
Previous addre	sses w	ithin the last fi		ee Section	on 5):		Dirtii.			
					,					
									Postcode	
Driver's Licenc	е					Copy Attached?	Pla	ice ssue		
1. Do you hav						charges agair			affic), that are less Yes No	
•	,	five years for juve convictions, find		,			nst you (ı	non-tra	affic), in any other	
Australian S	State tha	at are less than	10 years old	(five for	juvenile d	offences)? Se	e Section	6.	Yes No Commonwealth or	
Territory off	ences (non-traffic) that	are less tha	n 10 yea	rs old (five	e years for juv	enile offe	nces)	? See Section 6.	
		30 months? Se) where t	ne sentence	imposed	was II	mprisonment for a Yes No	
SECTION 2: TY) Tick app						
_		ck (\$29.80 Aust	•			lice and finge	rprints rec	cords	search (\$123.40 Australian). *	
NB: Organisations	s with au		ict records che	cks at a red	duced fee d		omplete Sec	ction 7 d	on the reverse of this form.	
SECTION 3: PU		ary work or occu				For persona			F for employment or release to any	
		E of position [se			9. –	other partie Certificate si		Section	n 6 "What will my National Police	
Driver or operat	or of a b	us, taxi, hire car, t	ow truck; or di	iving instr	uctor	Family Day	Care (Se	ction 8	3 on reverse must be completed).	
Application for overseas visa. Gaming licence application.						Other (Please spec	cify)			
SECTION 4: ST			NT AND IN	DEMNIT	Y	\	·			
I hereby consen	t to a ch	neck of the reco	rds of Victor	ia Police	and othe				to the release, to the address	
below, of details other matters de		o be relevant wh	nich are reco	orded aga			n, any ma	atters s	still outstanding against me and any	
Name and addr		, ,	ent [person or org	anisation])	Result	is to be s	ent to t	he a	pplicant	
	organisation/person to whom result is to be		(name and residential address as detailed above)							
sent. Victoria Police will		(Address of Rec	ipient) Rosu	It is to	he sen	t to the an	nlicant			
to this address.			Result is to be sent to the applicant							
Copies are NOT provided. (name and residential address as detailed above) In consideration of Victoria Police releasing details of any convictions and other information recorded against my name, I hereby indemnify the State of										
Victoria, its servants and agents including all members of Victoria Police against all actions, suits, proceedings, causes of action, costs, claims and demands whatsoever which may be brought or made against it or them by any body or person by reason of or arising out of the release of any details										
of any conviction and other information recorded against my name or purporting to either relate to or concern me.										
Signed: Signature of						itne Present ignature of	ce or:			
Applicant:					V	/itness:				
Printed Name Of Applicant:						rinted Name f Witness:				
Date:					D	ate:				
CHECKLIST: All relevant sections completed? Yes Have you attached: 1. Copy of identification? Yes 2. Relevant payment? Yes										

SECTION 5: INSTRUCTIONS FOR COMPLETING THIS FORM

Please ensure that you:

- Write in ink and use BLOCK LETTERS
- Complete all sections on the front of the form
- Complete the sections below if they apply to you
- Sign and date the form and have your signature witnessed
- Do not alter or delete the wording on the form in any way

You must attach the following documents to this form:

• A cheque or money order made payable to Victoria Police. The fees are: \$29.80 for a national name check

\$123.40 for a police and fingerprints records search.

MAIL THIS FORM AND ALL ATTACHMENTS TO:

PUBLIC ENQUIRY SERVICE VICTORIA POLICE P O BOX 418 MELBOURNE VIC 8005

Note 1: Fees change annually on 1st July, please refer to www.police.vic.gov.au or contact this office on 1300 881 596 to get the current fee if submitting form around this date. Note 2: A receipt will not be issued unless requested

PLEASE DO NOT SEND CASH THROUGH THE MAIL

- A photocopy of your driver's licence, passport or birth certificate.
- For a police and fingerprints records search, you must also enclose a full set of fingerprints taken on Victoria Police form 235A or an appropriate form from another police force. Fingerprints can be taken by appointment at a police station or at the Victoria Police Centre, 637 Flinders Street, Melbourne by phoning (03) 9628 8300 for appointments only for general enquiries please call

Previous or alternative names: In this section, write all names by which you are or have formerly been known, including your maiden name. If you have more than one such name, attach a separate list.

Previous addresses within the last five years: In this section write all addresses at which you have resided within the last five years. If you have more than one previous address, attach a separate list.

Type of check/fees: If you are not sure which type of check you need, ask the organisation or person who requires the check.

Purpose of Check: If the check is for employment, voluntary work or occupation related licensing, specify the type of work (eg. child care worker, cleaner, teacher, prison officer, sports coach, estate agent, bank officer, firefighter).

SECTION 6: WHAT WILL MY NATIONAL POLICE CERTIFICATE SHOW?

Victoria Police Policy - Victorian Records

For the purposes of employment, voluntary work or occupation related licensing/registration, Victoria Police may restrict the release of a person's police record according to the Victoria Police "Information Release Policy". If you have a police record with Victoria Police, the "Information Release Policy" may take into account the age of the police record and the purpose for which the information is being released. If ten years have elapsed since you were last found guilty of an offence in Victoria, Victoria Police will, in most instances, advise that you have no disclosable court outcomes. However, a record over ten years may be released:

- If it includes a term of imprisonment longer than thirty months;
- If it includes a serious violent or sexual offence and the records check is for the purpose of working with children, elderly people or disabled people;
- If it is for a Gaming licence application;
- If it is in the interests of crime prevention or public safety.

Please note:

- If the records check is for the applicant's personal information only, the above restrictions do not apply and all court results will be released.
- Findings of guilt without conviction and good behaviour bonds may be released.
- Recent charges or outstanding matters under investigation that have not yet gone to court may also be released.

Other Australian Police Forces - Non-Victorian Records

Where a police record with another Australian police force has been obtained, any relevant legislation (and/or release policy) affecting that police force will be applied before it is released. Under various pieces of Commonwealth, State and Territory legislation a person has the right, in particular circumstances or for a particular purpose, to not disclose certain convictions (eg findings of guilt over a certain age). Such convictions (widely referred to as 'spent' or 'rehabilitated' convictions) will not be released unless the records check is for the applicant's personal information only and providing that this is in accordance with relevant legislation (and/or release policy). Please contact individual police forces directly for further information about their release policies and any legislation which affects them.

SECTION 7: DECLARATION OF VOLUNTEER/STUDENT/FAMILY DAY CARE RESIDENT STATUS

(This section is for the use of organisations which have been authorised by Victoria Police to have records checks on volunteers, students or Family Day Care residents conducted at a reduced fee and should be completed by a representative of the authorising organisation/council). I declare that the applicant named on this form is a student, prospective voluntary worker or Family Day Care resident authorised by

the organisation named below. He/she will receive no payment for his/her services.				
Organisation Name:		CVF Number:		
Signature of Organisation's Representative:		Printed Name:		
Position:		Date:		

SECTION 8	FAMII Y	DAY CARE	SCHEME	PARTICIPANTS

SECTION 8: FAMILY DAY CARE SCHEME PARTICIPANTS					
This application is for the purpose of participation in a Family Day 0	Care Scheme. The person named on the front of this form is:				
Care provider – full fee applies, or					
Adult (eighteen years or over) residing with care provider reduced fee applies (Section 7 and following fields must be completed).					
Care Providerís name:	Dept. of Justice Working with Children Application/Card No:				