

OFFICE USE ONLY

SAFE NT

Phone 1800 723 368 (1800 SAFENT)

SAFE NT - NT Police

Email safent.police@nt.gov.au

Mail

Save time and APPLY ONLINE https://forms.pfes.nt.gov.au/safent/

Office Location

Ground Floor, 37 Woods Street Darwin

Opening Hours

Monday - Thursday 8.30am - 4.30pm Friday 9.30am - 4.30pm



workingwithchildren clearance - application

GPO Box 39764 Winnellie NT 0821

Date Received / / Receipt No	Lodged at	Entered	
For volunteers engaged in child-related wor All sections must be complete - insufficient information will result in the			rs.
SECTION A - DETAILS OF APPLICANT (this section	n must be completed)		
Title: Mr Mrs Miss Ms Mx Dr		Sex: Male	Female X
Family name/surname			
First given name	Other given name/s		
Daytime contact	Mobile number		
Email address			
Date of birth / / (dd/mm/yyyy)			
Place of birth Town / City St	ate	Country	
Other Names: Have you been known by any other name	? eg. name before marriage, alia	as, changed by deedpoll.	
Maiden name Former name Also known as Given name/s		Surname	
OR OR			
Former name Also known as Given name/s		Surname	
OR			
Please attach a separate sheet to list other names that you have been previous Australian Postal Address (Your Clearance Notice and Ochre Card		and otherwise requested	l in acction E)
PO Box number/Street number/Street name	Suburb/town	State	Postcode
Please check all details, including postcode, are correct. SAFE NT takes no	responsibility where undeliverable	e information is provided	<u>'</u>
Current Residential Address (must not be a PO Box or Business A	Address)		
(A current residential address must be supplied in order		•	
Street number/Street name	Suburb/town	State	Postcode
SECTION B - PREVIOUS RESIDENTIAL ADDRES	SS (this section must be com	pleted)	
Please list previous residential addresses for the past 5 y	vears starting with the mo	est recent but not i	ncludina vour current
residential address. If you cannot remember exact details,			0,
separate page if you require further space. Street number/Street name	Suburb/town	State	Postcode
Street Hulliper/Street Hallie	Suburb/town	State	Fosicode
Date from: (dd/mm/yyyy) / / Date to: /	/ Country if outside	Australia	
Street number/Street name	Suburb/town	State	Postcode
Date from: (dd/mm/www) / / Date to: /	/ Country if outside	Δustralia	

ATTACH
PHOTO
DO NOT STAPLE

SECTION C - ATTACH PHOTO HERE

A Clearance Notice will be accompanied by an "Ochre Card", that can be presented as evidence of the persons clearance to work in child-related employment. This card contains the holders photograph and unique Clearance Notice Number. A new photo must be provided for all new and renewal applications.

Attach a passport size and quality photo to your application. **Do not staple to the page.** See website for details on acceptable images. You do not need to attach a photo if you are lodging your application in person at SAFE NT.

SECTION D - PURPOSE OF CHECK
Application type: (tick one)
New Application OR Renewal Clearance Number Expiry Date
Type of employment: (tick one)
Volunteer OR Student placement
Occupation / brief description of role in child-related work
SECTION E - VOLUNTEER ORGANISATION DETAILS
The Screening Authority may notify any person who engages you in child-related employment, if your Clearance Notice is revoked or subject to imposed conditions.
Name of employer organisation
Postal address of organisation
Daytime Contact phone number Contact name/ Title of organisations representative
The following information is required:
By Default - Your Clearance Notice and Ochre Card will be sent directly to your personal Postal Address. It is your responsibility to confirm details of your clearance to work with children with your employer or potential employer within the Volunteer Organisation
OR
Please send to my employer. I consent to my personal information being delivered to this organisation listed. Note: Only one Ochre Card will be produced. Additional copies can be purchased from SAFE NT - conditions apply.
To be Completed by CEO or Manager of Volunteer Organisation
I certify that the person named on this form is a registered volunteer with this organisation and will receive no payment, benefit or
financial gain from work they undertake.
Name
What is the volunteer role?
vinacio dio volunteel 1016:
Contact name / title of organisations representative Daytime phone number
Signed Date / / (dd/mm/yyyy)

SECTION F - PROOF OF IDENTITY

Proof of identity documentation

Applicants must attach a copy of a minimum of two (2) types of acceptable identification from the list below with a minimum of 100 points. Identification must include at least one type of photo ID (Category A) plus identification that contains the applicant's current residential address, signature and date of birth. All ID must be in the same name or you must provide a change of name certificate. **All documents must be current or valid.**

	tegory A u must have at least ONE Category	y A document	Category B	
1.	Passport (Australian/Foreign) = 70 p	points	7. Australian citizenship certificate = 70 points	
2.	Australian drivers licence = 40 point	s	8. Birth certificate = 70 points	
3.	Australian issued Firearms licence :	= 40 points	9. Centrelink cards = 25 points	
4.	Australian evidence of age card (18	+) = 40 points	10. Government employee ID = 40 points	
5.	Working with children or vulnerable person clearance = 40 points		11. Statutory declaration as to identity containing image of applicant = 40 points	
6.	Community identity card or document with photo, name and DOB from an Aboriginal Land Council = 40 points		12. Medicare card = 25 points	
			13. Property rates notice/utilities notice (with current residential address) = 25 points	
	Add total points - must be 100 po minimum two (2) types of acceptab		14. Bank statement (with current residential address) = 25 points	
			the documents used to verify your ID. You must include informations, including licence/passport/ID number and expiry date.	n
Ca	tegory A document. Please identify	document number fr	from list above (1–6).	
Pa	ssport/licence/ID number			
Sta	ate of Issue		Expiry Date / /	
Со	untry of Issue			
	ner document provided. Please ider s can be a second Category A docu		ber from list above (1–15).	
Ca	rd/licence/membership/ID number			
Sta	ate of Issue		Expiry Date / /	
Со	untry of Issue			
For	further information contact: safent.police@	pfes.nt.gov.au. If you ar	the Screening Authority for the ability to vary the requirement for meeting 100 point are under the age of 18, then one document from Group A or a statutory declaration by a Principal of that school will be sufficient to satisfy the 100 point check.	
s	ECTION G - CANDIDATES/A	PPLICANTS DE	ECLARATION	
	ertify the information contained in this ap n the past. I am aware it is an offence to		correct, and that I have disclosed all names, including aliases used by me noding information.	ЭW
und may to,	lerstand SAFE NT will obtain information y include courts, police, prosecution age	n about my criminal his encies or previous emp ges or information relat	ening check on me to determine my suitability to engage in Child-related worl istory and any additional information relating to that record from sources whi aployers. I understand that the information obtained includes, but is not limit ating to offences committed or allegedly committed by me, regardless of wh	ich ed
	nderstand SAFE NT will make use cained to enable a full and informed asse		and any subsequent information about my criminal history which may	be
Sig	ined		Date / / (dd/mm/yyyy)	

SECTION H - LODGING YOUR APPLICATION FORM

Have you completed all sections of this form?
Have you attached copies of ID to the value of 100 points including at least one photographic ID?
Have you attached a passport size and quality photograph of yourself (not required if lodging form in person at SAFE NT)?
Have you decided how you will pay?

Applications that are emailed will NOT be accepted. Applications will not be processed unless payment is made.

Lodge and pay with SAFE NT

In person

Cash, Cheque/Money Order, EFTPOS/Credit Card

SAFE NT Ground Floor

37 Woods St, Darwin

Office hours

Mon-Thurs 8.30am - 4.30pmFriday only 9.30am - 4.30pm Via mail

Option 1 - Mail application and payment Cheque or money order - No cash

SAFE NT PO Box 39764 WINNELLIE NT 0821

Option 2 – Mail application and pay over the phone

Visa/Mastercard

Provide contact details below and SAFE NT will call you to take your

credit card payment.

Over the phone payment for mailed applications – nominate the best contact person and contact number below.

Name of contact person	Contact number

Lodge and pay in person with a Territory Business Centre

Payment options are cash, credit card or EFTPOS.

Darwin Tennant Creek Katherine Alice Springs Building 3 Big Rivers Government Centre Shop 2 Barkly House Green Well Building Darwin Corporate Park 5 First Street Cnr Davidson Street and 50 Bath Street 631 Stuart Highway Paterson Street Katherine Alice Springs **Tennant Creek** Berrimah, Darwin **Opening hours** Opening hours **Opening hours** Mon – Fri **Opening hours** Mon - Fri Mon - Fri 8.00am - 4.30pm Mon - Fri 8.00am - 4.00pm 8.00am - 4.30pm 8.00am - 4.21pm

Contact: Phone: 1800 723 368 Postal: SAFE NT - PO Box 39764 WINNELLIE NT 0821

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