

Application for Criminal History Check and consent to release National Police Certificate. Please complete in BLOCK letters OFFICE USE ONLY

Date Received	1 1	CNI		SPI		
Receipt No		Lodged at		Entered		
CHECK REQ	UIRED (this section must be	completed)				
		NAME CHECK			EER CONCESSION - C	-
	our fingerprints with this application. 5 for information and bookings. Visi	• •			plice stations by appointmen	t only.
SECTION A -	DETAILS OF THE APPI	LICANT				
					• ··· · □ -	
Title: Mr M		Mx Dr				nale X
Family name/su					l only have a legal	single name
First given name) 		Other given na	ame/s		
Daytime contac	t		Mobile numbe	er		
Email address						
Date of birth	/ /	(dd/mm/yyyy)				
Place of birth T	own / City	Stat	e		Country	
Other Names:	Have you been known by a	iny other name?	g. name before ma	rriage, alias,	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						
	 arate sheet to list other names that y	ou have been previous	ly known as.			
Association Desc						
	a l Address (Your National Polic) /Street number/Street name	e Certificate will be maile	ed to this address) Suburb	/town	State	Postcode
Please check all det	ails, including postcode, are correct.	SAFE NT takes no res	onsibility where un	deliverable in	formation is provided.	
	ntial Address (must not be a P		-		,	
	lential address must be su			oplication))	
Street number/S	treet name		Suburb	/town	State	Postcode
		Co	ountry			

SECTION B - PREVIOUS RESIDENTIAL ADDRESSES

Please provide details of your previous residential addresses for the last 5 years (
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Street number/Street name	Suburb/town	State	Postcode
Date from: (dd/mm/yyyy) / / Date to: / /	Country if outside Australia		
Street number/Street name	Suburb/town	State	Postcode
Date from: (dd/mm/yyyy) / / Date to: / /	Country if outside Australia		
Street number/Street name	Suburb/town	State	Postcode
Date from: (dd/mm/yyyy) / / Date to: / /	Country if outside Australia		
Places attach a separate sheat if you require further space to list other providus resident	ial addresses over the past 5 years		

Please attach a separate sheet if you require further space to list other previous residential addresses over the past 5 years.

SECTION C - PURPOSE OF CHECK

This section must be completed.

When compiling a National Police Certificate containing your criminal history information, NT Police conduct a national name check. If information is obtained from other police jurisdictions, the relevant legislation or policy for that jurisdiction, together with that of the Northern Territory is applied to the information before it is released. The legislation to be applied is determined by the purpose of your check, which is listed on your certificate.

What is the role you need this check for?

Please check with your employer or licensing authority if unsure

Once the certificate is issued, the purpose cannot be changed.

Provide a brief description of the work you will be doing.

SECTION D - EMPLOYER ORGANISATION / LICENCING AUTHORITY DETAILS

Name of employer organisation/licencing authority

Postal address of organisation	
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Daytime Contact phone number

Position title of organisation's representative (e.g. HR Manager, Licensing Board)

Please tick if you require the original results of this check to be sent directly to the organisation listed above *Note: only one certificate will be produced. Additional copies can be purchased - conditions apply.*

SECTION E – VOLUNTEER ORGANISATION DETAILS

To be eligible for the Volunteer Concession fee this section must be completed by your employer/volunteer organisation.

Name of organisation		
Postal address of organisation		
Daytime Contact phone number.		

Please tick if you require the original results of this check to be sent directly to the volunteer organisation listed above *Note: only one certificate will be produced. Additional copies can be purchased - conditions apply.*

To be completed by CEO/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 the work that they undertake on our behalf.

Name/position

What is the volunteer role?					
Signature	Date si	gned			
		/	/	(dd/mm/yyyy)	
	(Must be date of a	comple applicatio	ted no ear on lodgem	lier than 3 months from the ent)	

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.**

Category A

You must have at least ONE	Category A document
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1.	Passport (Australian/Foreign) = 70 points	
2.	Australian drivers licence $= 40 \text{ points}$	
3.	Australian issued Firearms licence = 40 points	
4.	Australian evidence of age card $(18+) = 40$ points	
5.	Working with children or vulnerable person clearance $= 40$ points	
6.	Community identity card or document with photo, name and DOB from an Aboriginal Land Council = 40 points	

Add total points - must be 100 points or more minimum two (2) types of acceptable identification

Category B

- 7. Australian citizenship certificate = 70 points
- 8. Birth certificate = 70 points
- 9. Centrelink cards = 25 points
- 10. Government employee ID = 40 points
- 11. Statutory declaration as to identity containing image of applicant = 40 points
- 12. Medicare card = 25 points
- Property rates notice/utilities notice (with current residential address) = 25 points
- 14. Bank statement (with current residential address) = 25 points

SECTION F - PROOF OF IDENTITY CONTINUED

Complete the following section with details from two of the documents used to verify your ID. You must include information from at least one Category A document from the list above, including licence/passport/ID number and expiry date.

Category A document. Please identify of	document number from list above (1–6).	to this application	st de attache		
Passport/licence/ID number					
State of Issue		Expiry Date	/	/	
Country of Issue					
Other document provided. Please ident This can be a second Category A document.	tify document number from list above (1–15).				
Card/licence/membership/ID number					
State of Issue		Expiry Date	/	/	
Country of Issue					

In certain circumstances of hardship an application may be made to SAFE NT for the ability to vary the requirement for meeting 100 points. For further information contact: safent.police@pfes.nt.gov.au

If you are under the age of 18, then one document from Group A or a statutory declaration of identity attesting that you are a current student of the school made by a Principal of that school will be sufficient to satisfy the 100 point check

SECTION G – CERTIFICATION AND STATEMENT OF CONSENT AND INDEMNITY

I certify that I am the applicant named in this form and all the details provided by me are true and correct. I have not omitted names or aliases that I have or may have used previously. I have read and understood the contents of this form.

I consent to the release of details of any convictions, or other information, including pursuant to section 15 and section 15A of the *Criminal Records (Spent Convictions) Act 1992*, convictions that are otherwise known as 'spent convictions', recorded against my name, to the person and/or organisation listed on this form.

I hereby indemnify the Northern Territory of Australia, its servants and agents including all members of Northern Territory Police against all liabilities and against all actions, suits, proceedings, claims, demands, costs, and expenses whatsoever which may be taken or made in respect of the release or use hereunder of any details of any convictions, or other information purporting to either relate to or involve me.

Name of applicant

Signature

Date Signed

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SECTION H - LODGING YOUR APPLICATION AND PAYMENT OPTIONS

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	Via mail
Cash, Cheque/Money Order, EFTPOS/Credit Card	Option 1 - Mail application and payment
SAFE NT	Cheque or money order - No cash
Ground Floor	SAFE NT
71 Smith St, Darwin	PO Box 39764
Office hours	WINNELLIE NT 0821
Mon -Thurs 8.30am– 4.00pm	Option 2 – Mail application and pay over the phone
Friday only 9.30am – 4.00pm	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
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Contact number

SECTION H - LODGING YOUR APPLICATION AND PAYMENT OPTIONS CONTINUED

Lodge and pay in person with a Territory Business Centre

Payment options are cash, credit card or EFTPOS.

Darwin	Katherine	Tennant Creek	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	Katherine	Paterson Street	Alice Springs	
Berrimah, Darwin	Opening hours	Tennant Creek	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:

Web:

1800 723 368 www.pfes.nt.gov.au/safent Postal: Email: SAFE NT - PO Box 39764 WINNELLIE NT 0821 safent.police@nt.gov.au