# ACT GovernmentNationally Coordinated Criminal History Check Consent

# and Self Disclosure Form

## *Instructions*

The ACT Public Service must take appropriate steps to ensure employees are fit and proper persons.

Use this form to disclose factors, police records or any other information that may be relevant in determining suitability for employment.

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| Applicant Details | | | |
| Family Name: | | | |
| Given Names: | | | |
| Date of Birth: Click here to enter a date. | | Gender: | |
| Town of Birth: | | | |
| State of Birth: | | | |
| Country of Birth: | | | |
| Tel Home: | Tel Work: | | Tel Mobile: |
| Australian Drivers Licence Number:       Issuing State:  I have attached a copy | | | |
| **Previous or Other Names** by which you are known or have been formerly known must also be listed e.g. maiden, deed poll. | | | |
| Previous Family and Given Names  (*Please provide all combinations, e.g. Mary Smith, Mary Anne Smith, Mary-Anne Jones)* | | | |
| **Permanent Residential Address Details** over the last five years | | | |
| Current Residential Address (*Unit No/Street No, Street Name, Suburb, City, State, Post Code, Country*)   |  |  | | --- | --- | |  | | | Period from: Click here to enter a date. | Period to: Click here to enter a date. | | | | |
| Previous Residential Address (*Unit No/Street No, Street Name, Suburb, City, State, Post Code, Country*)   |  |  | | --- | --- | |  | | | Period from: Click here to enter a date. | Period to: Click here to enter a date. |  |  |  | | --- | --- | |  | | | Period from: Click here to enter a date. | Period to: Click here to enter a date. |  |  |  | | --- | --- | |  | | | Period from: Click here to enter a date. | Period to: Click here to enter a date. |  |  |  | | --- | --- | |  | | | Period from: Click here to enter a date. | Period to: Click here to enter a date. | |  | | | Period from: Click here to enter a date. | Period to: Click here to enter a date. |  |  |  | | --- | --- | |  | | | Period from: Click here to enter a date. | Period to: Click here to enter a date. | | | | |

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| **Identity Check – certified copies must be provided** |
| I have provided certified copies of the required identification. For more detail on accepted forms of identification please visit [https://get.cited.com.au/assets/resources/acic-identity-document-requirements/#commencement-of-identity-documents](https://get.cited.com.au/assets/resources/acic-identity-document-requirements/" \l "commencement-of-identity-documents) |

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| Self Disclosure |
| I acknowledge that the information disclosed:   * Will be held securely by the ACTPS; * Is collected as a lawful administrative function of the ACTPS; and * Will be used to assess my suitability for employment with the ACTPS only.   I have no matters to disclose.  I have the following matters to disclose: |
| Consent |
| I have read the Form Completion Guide on the following page and I am aware that exclusions from spent convictions legislation may apply to some categories of Nationally Coordinated Criminal History Checks (NCCHC).  The personal information I have provided and all information I have disclosed on this form is related to me and is correct.  I acknowledge the information provided on this form will be forwarded to the AFP, Australian Criminal Intelligence Commission, and or the Police Services of the States and Territories of the Commonwealth of Australia.  I consent to the AFP and any other Australian police force extracting details of any convictions, findings of guilt or pending court proceedings relating to me including in relation to any traffic offence, and providing that information to me or the Employer Organisation named above as approved or to another person agency as named above.  I acknowledge the information provided on this form will not be used without my prior consent for any other purpose, unless otherwise authorised by law.  I acknowledge that any information provided on this form or disclosed by the police as a result of the records check may be taken into account by the ACT Government mentioned above or any organisation to which I present the results of the records check in assessing my suitability to receive the entitlement.  Signature: Date: Click here to enter a date.  If you are under 18 years of age, please provide consent from a parent/guardian  Parent/Guardian Name:  Parent Guardian Signature: Date: Click here to enter a date. |

# Form Completion Guide

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| **Personal Details** |
| All personal details must be provided including all current and previous names, previous addresses, telephone contact numbers, drivers licence details etc.  Certified true copies of identification documents must be provided. |
| **Consent** |
| This section must be signed by the applicant. If a parent/guardian has signed in the consent section they consent to a Nationally Coordinated Criminal History check being sought on their son/daughter/ward. |
| **Spent Convictions Legislation** |
| The aim of spent convictions legislation is to prevent discrimination on the basis of certain previous convictions. Spent convictions legislation limits the use and disclosure of older, less serious convictions and findings of guilt.  There are some offences excluded from being spent where the check is required for certain purposes as indicated in the table above – these offences will be released regardless of how old they are.  Where a record exists within an Australian police jurisdiction, relevant spent conviction legislation/policies governing the release of that information for that jurisdiction will be applied. As a result certain convictions will not be released provided this is in accordance with the relevant legislation/policies.  For Commonwealth records the AFP applies the provisions within the ACT *Spent Convictions Act 2000* are applicable*.*  If further information or clarification is required please contact the individual jurisdiction where the record is held. |
| **Provision of False or Misleading Information** |
| You are asked to certify that the personal information you have provided on this form is correct. Where the check is for employment related purposes and the result is to be provided to the employer or other organisation, discovery of any false or misleading information may be reported by the AFP and may impact on the decision being undertaken by the employer or organisation. |
| **Disputed Record Enquiries** |
| If an applicant believes the information provided on the police check is incorrect or inaccurate you will need to contact [HRSharedServices@act.gov.au](mailto:HRSharedServices@act.gov.au), with details for a dispute to be lodged through the accredited body or Police Agency. For more information on lodging a dispute please visit <https://www.acic.gov.au/our-services/national-police-checking-service/find-out-more-information/appeals-and-disputes> Include any additional information or documents supporting the enquiry to enable the provider to more accurately assess the application. In some instances, the provider may require comparison fingerprints to resolve some disputes. Applicants will be notified in such instances. |
| **The Privacy Commissioner** |
| The Privacy Commissioneris responsible for ensuring the protection of private information relating to individuals. This includes investigating instances where information has been released improperly or incorrectly. An individual who believes the standards dealing with disclosure and use of old conviction information have been breached may apply to the Privacy Commissioner for an investigation of the matter. The phone number is 1300 363 992. |