# Blue Card Services Department of Justice and Attorney-General



# **Blue card application**

Working with Children (Risk Management and Screening) Act 2000 This form is to be completed by paid employees, volunteers and students proposing to start or continue in child-related employment.

## **Important Notice**

If you are eligible to apply for a blue card (please see **disqualified person**<sup>#</sup> definition on page 4), continue to complete this application. If you are not eligible, **do not** complete this form and complete an Eligibility Declaration form instead.

Part A – Child related activity details (to be completed by the organisation)			<b>C – Category of child related activity</b> be completed by the organisation)
1	Please select the type of child-related employment for which a blue card is required:	and	rmation about categories of child-related employment whether any exemptions apply is available from v.bluecard.qld.gov.au.
	Paid employee (payment details required in Part G) Volunteer (no payment required)	Plea	se select the type of child-related activity to which the loyment relates:
	Student (no payment required)		Child accommodation services including home stays
2	Is this application associated with NDIS?		Child care (including education and care)
	Yes No		Churches, clubs and associations
	rt B – Organisation details be completed by the organisation)		Education programs conducted outside school (suspended or excluded students or flexible arrangements under the <i>Education (General</i>
1	Name of organisation		Provisions) Act 2006)
			Emergency services cadet program
2	Organisation ID number <i>(if known)</i>		Health, counselling and support services (including disability services)
			Licensed care services
3	Postal address of organisation		Local Government
			Paid private teaching, coaching or tutoring
	Postcode		Religious representatives
4	Contact person's name		Residential facilities
-			School boarding houses
-	Contact person's position		School crossing supervisors
5			Schools (other than registered teachers and parents)
			Sport and active recreation
6	Telephone		
7	Email		

OFFICIAL USE ONLY		
Receipt number:	Date:	Initials:
		Queensland Government



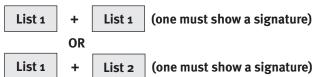


Ра	<b>rt D – Applicant's details</b> (to be completed by the applica	ant)	
1	Title Mr Mrs Miss Ms	1	<b>2</b> Previous blue/exemption card number ( <i>if applicable</i> ):
-	Other		
2	Full legal name	1	<b>3</b> Are you, or have you ever been a: (please tick)
-	Family name		Foster or kinship carer
	First name		Health practitioner
	Middle name		Operator/supervisor/carer of a child care
	No middle name (please tick)		or education service
			Teacher
3	Do you have a previous name, or have you been known by any other name?	1	4 Applicant's declaration
	Yes (record details below) No		I declare that:
	It does not matter how long ago you used the name		<ul> <li>I have read the information on page 4 and I am not</li> </ul>
	or how long the name was used for e.g.		<ul><li>disqualified from applying for a blue card<sup>#</sup>;</li><li>I am the applicant named in this form and have not</li></ul>
	• birth name • name before marriage • married name		omitted any names or aliases that I use or have used
	alias     • change by certificate     • adoption		in the past;
	• changed order of name		• the information and identification documents provided
	Family name		by me for this application are true and correct and I understand it is an offence to provide a false or
	First name		misleading statement or document;
	Middle name		<ul> <li>I consent to information from any police, court,</li> </ul>
	If you require more space, please tick this box		prosecuting authority or other authorised agency being
	and attach a separate list.		obtained and for the police, courts, prosecuting authority or other authorised agency to disclose any information
4	Gender		for the purposes of assessing my eligibility to work with
_			children including ongoing checks while my application/
5	Date of birth		<ul><li>blue card remains current;</li><li>I understand that the information obtained includes</li></ul>
6	Place of birth		but is not limited to details of convictions <sup>^</sup> and
	Town/City		pending or non-conviction charges* or information on
	State/Territory		the circumstances relating to offences committed or allegedly committed by me, regardless of when and
	Country		where the offence or alleged offence occurred;
7	Current postal address (within Australia)		• I understand my organisation will be advised whether or
<b>'</b>			not I have a current application for, or hold a current blue/
			exemption card; the outcome of this application which may include whether my application is withdrawn, or a
	Postcode		negative notice issued, or if my blue/exemption card is
			subsequently suspended or cancelled;
8	Current residential address (if different to above)		<ul> <li>I am proposing to start or continue in regulated employment and am not entitled to an exemption;</li> </ul>
			<ul> <li>I understand and will comply with my blue card</li> </ul>
			obligations as a blue card applicant/cardholder; and
	Postcode		• I consent to confirmation of the validity of my blue card
9	Telephone number		being published or provided.
	Daytime		Sign inside the box. Please do not touch or go outside the lines.
	Mobile Nobile		
10	Email		
11	Do you identify as? (if applicable)		
	Aboriginal Torres Strait Islander		Date of signature
	Aboriginal and Torres Strait Islander		D D M M Y Y Y

### Part E – Proof of identity (to be completed by the organisation)

The organisation must check **two current, original** identification documents from the applicant which collectively show the **applicant's full name, date of birth and signature**. The applicant's details on their identification documents must match the details provided in Part D.

One of the following combinations must be used: EITHER



If one of the valid identification combinations above cannot be provided, complete and attach a '*Request to consider alternative identification*' form.

If the applicant resides more than 50km from the organisation or has a disability which affects their mobility, complete and submit an 'Confirmation of identity' form.

Please indicate which identification documents have been sighted by placing a $arDelta$ in the box.				
LIST 1 SIGNATURE DOCUMENT	LIST 2 SIGNATURE DOCUMENT			
<ul> <li>Driver licence/learner permit/proof of age card</li> <li>Licence No:         <ul> <li>Issued in the state of:</li> <li>Australian Passport (current or expired in the last 2 years)</li> </ul> </li> <li>NON-SIGNATURE DOCUMENT         <ul> <li>Birth certificate (or extract)</li> </ul> </li> </ul>	<ul> <li>Pension Concession card/Department of Veterans' Affairs Entitlement card/Seniors Health card/Health care card/ any other current financial entitlement card issued by Department of Human Services.</li> <li>Credit card or bank card (<i>do not attach copy</i>)</li> <li>Positive Notice Blue or Exemption card</li> <li>Student identification card issued by an education institution (with photo and signature)</li> <li>Queensland Gaming Machine Licence</li> </ul>			
Proof of Australian citizenship or permanent residency           Overseas Passport (current)				
Country of issue:	<ul> <li>Medicare card</li> <li>Queensland crowd controller/private investigator/ security officer licence</li> <li>Passbook or account statement issued by a financial institution dated in the last 6 months</li> <li>Australian taxation assessment notice dated in the last 6 months</li> </ul>			
If possible, please attach a photocopy of the documents sighte	last 6 months         Queensland Licence issued under the Weapons Act 1990         ed for verification purposes (excluding credit or bank cards).			

#### Part F – Organisation declaration (to be completed by the organisation)

**IMPORTANT NOTE:** This section must be completed by the organisation's representative irrespective of whether or not the organisation can sight the identification above.

I declare that:

- I understand that it is an offence to provide a false or misleading statement or document;
- I am authorised to submit this application on behalf of the organisation;
- the applicant is proposing to start or continue in regulated employment and an exemption does not apply;
- I have warned the applicant that it is an offence for a disqualified person to sign a blue card application (see page 4)<sup>#</sup>; and
  I have either:
  - checked the details provided in this form and confirmed they match those on the identification documents sighted; or
     delegated this responsibility to a prescribed person and have attached the 'Confirmation of identity' form.

**Note:** It is an offence not to warn the applicant that it is an offence for a disqualified person to sign a blue card application.

	Name of representative
Signature of representative Date of signature	Position of representative

Applicant's name

# **Privacy notice**

The Working with Children (Risk Management and Screening) Act 2000 allows the collection of personal information to assess your eligibility to be issued with a blue/exemption card.

Information will be provided to Queensland Police, and may be provided to police, courts, prosecuting authorities or other authorised agencies as part of the screening process. Information may also be given to:

- certain disciplinary bodies to obtain relevant disciplinary information; and/or
- your employer, any supervisory body, or other person you have authorised to discuss your application on your behalf.
- Personal information will only be provided to other persons or agencies with your permission or where required by law.

#### Important information

You can withdraw your consent to screening at any time before a decision is made.

#### **\*Disqualified person**

#### It is an offence for a disqualified person to sign a blue card application form.

A disqualified person is someone who:

- has been convicted<sup>^</sup> of a disqualifying offence, which includes having sex with a child (irrespective of the type of relationship e.g. teenage boyfriend/girlfriend, unlawful carnal knowledge) or other child-related sex or pornography offences or the murder of a child (irrespective of the penalty and regardless of when and where it occurred); or
- is the subject of:
  - reporting obligations under the Child Protection (Offender Reporting) Act 2004; or
  - an offender prohibition order under the Child Protection (Offender Prohibition Order) Act 2008; or
  - a disqualification order issued by a court prohibiting them from applying for or holding a blue card; or
  - a sexual offender order under the *Dangerous Prisoners (Sexual Offenders) Act 2003*.
- \*Non-conviction charge means, whether a person was charged as an adult or a child, a charge: that has been withdrawn; that has been the subject of a nolle prosequi, a no true bill or a submission of no evidence to offer; that led to a conviction that was quashed on appeal; or upon which a person was acquitted or disposed of by a court otherwise than by way of conviction.
- <sup>^</sup>Conviction/convicted means a finding of guilt by a court, or the acceptance of a plea of guilty by a court, whether or not a conviction is recorded and regardless of when and where it occurred.
- A disqualified person can apply to be declared eligible to apply for a blue card in certain limited circumstances.

For more information about the blue card system and your obligations go to www.bluecard.qld.gov.au.

#### **Application lodgement**

Applications may be lodged by one of the following methods:

#### O Scan and upload

www.bluecard.qld.gov.au/uploadform

By post PO Box 12671, Brisbane George Street QLD 4003

In person 53 Albert Street, Brisbane QLD 4000

#### 🕲 By fax

07 3035 5910



<b>Part G – Payment options for PAID employees only</b> The application fee is GST exempt (under division 81), non refundable and subject to change.		
An <b>\$87.20</b> fee is required for paid employees. Please select one of the following payment methods:		
Credit card—complete payment online at www.bluecard.qld.gov.au		
Receipt number Date payment made		
To avoid delays in processing, please attach a copy of the receipt when paying by credit card and ensure all applicant details match those on this form.		
<b>Cash or EFTPOS</b> (over the counter transaction only)		
<b>Cheque/Money order</b> —made payable to Blue Card Services (ABN 60 789 586 626)		
Postal address for receipt (must be completed if the receipt is to be sent to someone other than the applicant)		
Postcode		
Email address for receipt		

Blue Card Services, Department of Justice and Attorney-General

U Scan and upload at www.bluecard.qld.gov.au/uploadform

PO Box 12671, Brisbane George Street QLD 4003

la 53 Albert Street, Brisbane QLD 4000

🔇 07 3211 6999 or 1800 113 611 Eax 07 3035 5910 www.bluecard.qld.gov.au

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