



commission for  
children and young people  
and child guardian

# Completing an FDC (Carer) blue card application form

This information sheet provides guidance to family day care schemes and carers on how to complete the FDC (Carer) blue card application form.

All sections of the blue card application form must be completed, or there may be delays in processing the application.

## Part A – Family day care scheme details

*(This part must be completed by the licensee/nominee or a representative of the FDC Scheme)*

**Step 1:** fill out all sections of **Part A**, including the name of the licensee/nominee in section 2. All written correspondence from the Commission will be addressed to the licensee/nominee of the family day care scheme.

**Note:** the licensee/nominee does not have to be the person who sights the carer's identification documents.

**Step 2:** In section 3, the names of two authorised contacts should be provided. An authorised contact will be able to liaise with the Commission about the application.

**Note:** to ensure a representative from the family day care scheme is authorised to discuss the application where necessary, it is important to advise the Commission in writing should either of the authorised contacts change.

## Part B – Payment option details

The application form must be accompanied by the prescribed fee. Failure to include payment will delay the processing of the application.

## Part C – Applicant's details

*(This part must be completed by the family day carer applying for a blue card)*

**Step 1:** the licensee/nominee or their representative should ensure the carer completes sections 8-21 in **Part C**.

**Step 2:** the carer should carefully read the declaration in section 22 and sign in the box provided using a blue or black pen.

## Part D – Proof of identity declaration

*(This part must be completed by a licensee/nominee or a representative of the FDC Scheme, except in certain limited circumstances)*

**Step 1:** the carer must provide **two** forms of identification. They must either provide:

- **one** document from **List 1** and **one** document from **List 2**, or
- **two** documents from **List 1**.

**Note:** the documents accepted are listed on the application form. They must be originals, not photocopies.

**Step 2:** the person sighting the identification documents must confirm that the following details provided by the carer on the form match those on the documents:

- full name
- date of birth
- signature.

**Step 3:** the person sighting the documents should indicate which documents were sighted by ticking the appropriate box and recording the document number (if applicable).

**Step 4:** if possible, please photocopy the original documents sighted (including any change of name documents) and attach them to the application form.

## Part E – Declaration by licensee/nominee or their representative

*(This part must be completed by the licensee/nominee or a representative of the FDC Scheme even where a prescribed person has sighted the carer's identification documents)*

**Step 1:** The licensee/nominee or their representative must certify that they have the authority to submit the application on behalf of the carer and that they have **either:**

- sighted the identification documents set out in sections 23 and/or 24, **or**
- are unable to sight the identification documents (if so, tick the box to indicate why a prescribed person has done this).

**Step 2:** The licensee/nominee or their representative must sign the declaration in **Part E** when satisfied that the carer's personal details on the form exactly match the identification documents and that documents showing the carer's **full name, date of birth** and **signature** have been sighted.

## Part F – Declaration by prescribed person

This part should be completed by a prescribed person, **only** where the licensee/nominee or their representative has certified that they cannot sight the carer's identification documents.

**Step 1:** the prescribed person should only sign the declaration in this section when satisfied that the carer's personal details on the form exactly match the details on the identification documents **and** that documents showing the carer's **full name, date of birth** and **signature** have been sighted.

### Checklist

#### Carer

Have you:

- completed all sections of **Part C** in full including full name (and middle name if any), former name/s, date and place of birth?
- carefully read, signed and dated the **Applicant's declaration** in section 22 in black or blue pen, inside the signature box?

#### Licensee/nominee or representative

Have you:

- completed **Part A**?
- carefully read and completed **Part E** - **either** certifying that you have sighted two original identification documents, **or** that you are unable to sight the identification documents for one of the reasons listed?

#### Where the licensee/nominee or their representative sights the identification documents

Have you:

- sighted **two** original documents (**either** one from List 1 and one from List 2, **or** two from List 1)?
- indicated in **Part D** which two original documents you have sighted?

- sighted documents showing the carer's **full name, date of birth** and **signature**?
- confirmed that the details recorded in **Part C** of the form match those on the identification documents sighted?
- carefully read, signed and dated the Declaration in **Part E**?

#### Where a prescribed person sights the identification documents

Have you:

- sighted **two** original documents (**either** one from List 1 and one from List 2 **or** two from List 1)?
- indicated in **Part D** which two original documents you have sighted?
- sighted documents showing the carer's **full name, date of birth** and **signature**?
- confirmed that the details recorded in **Part C** of the form match those on the identification documents sighted?
- carefully read, signed and dated the Declaration in **Part F**?

**For further assistance** on completing the application form, please contact the Commission on **1800 113 611** or **(07) 3211 6999**.

### Commission for Children and Young People and Child Guardian

**Street address:** Level 17, 53 Albert Street  
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#### Blue Card Contact Centre:

**Office Hours:** 8:00am – 5:00pm  
Monday to Friday

**Telephone:** 07 3211 6999

**Freecall:** 1800 113 611

**Fax:** 07 3035 5910

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Contact us