



Request to consider alternative identification

Working with Children (Risk Management and Screening) Act 2000

This form is to be completed by blue/exemption card applicants who cannot satisfy identification requirements. This form must accompany the blue/exemption card application.

Part A – Blue card applicant's details																					
1 Family name	<input type="text"/>																				
2 First name	<input type="text"/>																				
3 Middle name	<input type="text"/>																				
4 Date of birth	<table border="1"> <tr> <td><input type="text"/></td><td><input type="text"/></td> <td><input type="text"/></td><td><input type="text"/></td> <td><input type="text"/></td><td><input type="text"/></td> <td><input type="text"/></td><td><input type="text"/></td> <td><input type="text"/></td><td><input type="text"/></td> </tr> <tr> <td>D</td><td>D</td> <td>M</td><td>M</td> <td>Y</td><td>Y</td> <td>Y</td><td>Y</td> <td></td><td></td> </tr> </table>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	D	D	M	M	Y	Y	Y	Y		
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>												
D	D	M	M	Y	Y	Y	Y														
5 Current postal address	<input type="text"/> <input type="text"/> Postcode																				
6 Telephone	<input type="text"/>																				
7 Mobile	<input type="text"/>																				
8 Email	<input type="text"/>																				

Part B – Proof of identity (to be completed by the organisation or prescribed person)

The organisation or prescribed person 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 A.

Please indicate any identification documents that have been sighted by placing a and continue to Part C.

LIST 1	LIST 2
<p>SIGNATURE DOCUMENT</p> <p><input type="checkbox"/> Driver licence/learner permit/proof of age card</p> <p>Document No: <input type="text"/></p> <p>Issued in the state of: <input type="text"/></p> <p><input type="checkbox"/> Australian Passport (current or expired in the last 2 years)</p> <p>NON-SIGNATURE DOCUMENT</p> <p><input type="checkbox"/> Birth certificate (or extract)</p> <p><input type="checkbox"/> Proof of Australian citizenship or permanent residency</p> <p><input type="checkbox"/> Overseas Passport (current)</p> <p>Country of issue: <input type="text"/></p>	<p>SIGNATURE DOCUMENT</p> <p><input type="checkbox"/> 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.</p> <p><input type="checkbox"/> Credit card or bank card (<i>do not attach copy</i>)</p> <p><input type="checkbox"/> Positive Notice Blue or Exemption card</p> <p><input type="checkbox"/> Student identification card issued by an education institution (with photo and signature)</p> <p><input type="checkbox"/> Queensland Gaming Machine Licence</p> <p>NON-SIGNATURE DOCUMENT</p> <p><input type="checkbox"/> Medicare card</p> <p><input type="checkbox"/> Queensland crowd controller/private investigator/security officer licence</p> <p><input type="checkbox"/> Passbook or account statement issued by a financial institution dated in the last 6 months</p> <p><input type="checkbox"/> Australian taxation assessment notice dated in the last 6 months</p> <p><input type="checkbox"/> Queensland Licence issued under the <i>Weapons Act 1990</i></p>

If possible, please attach a photocopy of the documents sighted for verification purposes (excluding credit or bank cards).



Part C – Alternative identification documents

Please provide details of the identification documents the applicant is submitting for consideration which are not documented in List 1 or List 2.

At least 3 identification documents which together show the applicant's full name, date of birth and signature must be submitted.

1.
2.
3.
4.
5.
6.

Photocopies of the identification documents (both sides) you are submitting for consideration (including any documents indicated in Part B) must be attached.

Part E – Organisation/prescribed person's declaration

I declare that:

- the details provided in this form are true and correct;
- I have checked the name, date of birth and signature details provided in this form and confirm they match those on the identification documents sighted; and
- I understand it is an offence to provide a false or misleading statement or document.

Full name

Position

Organisation name (if applicable)

Signature

Date of signature

D D M M Y Y Y Y

Part D – Blue card applicant's declaration

I declare that:

- the details provided in this form are true and correct;
- the only List 1 or List 2 identification documents I am able to provide are those indicated in Part B; and
- I understand that it is an offence to provide a false or misleading statement or document.

Signature of applicant

Date of signature

D D M M Y Y Y Y

OFFICIAL USE ONLY

Approved/not approved

Signature

Date of signature

D D M M Y Y Y Y

Privacy Notice

The Department of Justice and Attorney-General (DJAG) is collecting your personal information under the *Working with Children (Risk Management and Screening) Act 2000*. Where relevant, DJAG will disclose personal information to organisations you work for or provide services to about whether you have a current application for, or hold a current blue/exemption card; the outcome of this application which may include its withdrawal or negative notice, or if your blue/exemption card is subsequently suspended or cancelled. DJAG publishes confirmation about whether your blue card is valid. DJAG will use and disclose your personal information to assess your application for a blue/exemption card and will disclose your personal information to courts, law enforcement agencies, disciplinary or supervisory bodies or anyone you have agreed for DJAG to discuss your application with. It may also be used to contact you with more information about your application and the Blue Card process. DJAG may use electronic communication for matters of information provision and collection of data for research purposes. DJAG manages your personal information in accordance with the *Information Privacy Act 2009*.

Blue Card Services, Department of Justice and Attorney-General

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07 3035 5910

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