



This form is to be used by an Applicant who is an Aboriginal and Torres Strait Islander Person unable to satisfy the Minimum Identity Requirements contained in the Informed Consent form.

BACKGROUND

Australian Criminal Intelligence Commission, as a Commonwealth agency, applies Commonwealth Policy to ensure that indigenous persons are not discriminated against or unfairly disadvantaged. This includes understanding that some Aboriginal and Torres Strait Islander People will not have traditional forms of identification because:

1. their birth was never registered;
2. they reside in a remote community;
3. they have no bills in their own name;
4. they have no personal bank account; and/or
5. their documents were lost due to fire, theft or natural disaster and they have been unable to obtain replacements.

AUTHORISED REFEREE (COMMUNITY LEADER)

This form must be signed by an **'Authorised Referee'**. An **'Authorised Referee'** includes:

- Chairperson, Secretary or CEO of an incorporated Indigenous organisation (including land councils, community councils, housing organisations etc.);
- a person who is recognised by the members of the Community to be a Community Elder;
- a member of the staff of the Aboriginal and Torres Strait Islander Commission;
- Community Development Employment Projects Coordinator;
- School Principal;
- School Counsellor;
- Minister of Religion;
- Treating Health Professional or Manager in Aboriginal Medical Services; and
- a Government employee of at least 5 years.

The Authorised Referee must:

- know the Applicant or be able to confirm the Applicant's identity from records;
- be part of the community from which the Applicant comes (i.e. either works or lives in that community); and
- cannot have known the Applicant for a short time or be part of their immediate family (e.g. parents, grandparents, siblings, children or grandchildren).

PROOF OF IDENTITY (SPECIAL PROVISION) FOR ABORIGINAL AND TORRES STRAIT ISLANDER PEOPLE

NATIONAL POLICE CHECKING SERVICE



AUSTRALIAN CRIMINAL INTELLIGENCE COMMISSION

SECTION 1: APPLICANT'S PERSONAL DETAILS

Surname (current)

Given Names (current)

Other names used or been known by (e.g. name at birth, nickname, maiden name, previous married name, Aboriginal or Tribal name, alias)

Date of birth

dd mm yyyy

Place of birth

Suburb/Town

State/Territory

Country

Address

Street number and name

Suburb/Town

State/Territory

Postcode

Applicant's Signature/Mark

Date

dd mm yyyy

IMPORTANT: On completion of this form, please print sign and date by hand.
Please complete SECTION 2 on the following page.



SECTION 2: STATEMENT BY AUTHORISED REFEREE

I confirm that:

- the Applicant has signed this in my presence; or
- the Applicant is currently Kms Hours away and I have identified them as the person named in Section 1 by my personal knowledge of their circumstances;
- I am an Authorised Referee (as listed above); and
- All the names I am aware of that the Applicant has been known by are included in Section 1; and
- I have known the Applicant:
 Professionally Personally for years
- I can confirm the Applicant's personal details from:
 Personal Knowledge Church Records Medical Records
 Organisation Records Council Records School Records

Other (please specify)

I also understand that it is a serious offence to provide false or misleading information on this form.

Authorised referee's signature

Date

/ /
dd mm yyyy

Print name

Title of official position

Name of Organisation or
Department

ABN (if applicable)

Mobile number

Phone number

Work number

IMPORTANT: On completion of this form, please print, sign and date by hand.

Seal/stamp