

# Authorisation to confirm a valid blue card/application

A person may complete this form to enable the Commission to advise the nominated authorised person of the matters listed in the consent on this form.

## PART A Card holder's/Applicant's personal details

**1** Family name

First name/s

Middle name/s

Date of birth  /  /   
DAY MONTH YEAR

Place of birth

Current postal address

Postcode

Daytime contact no.

Blue card number  Blue card expiry date

## PART B Authorised person's details

**2** Name of authorised person

Name of organisation (if applicable)

Position (if applicable)

Postal address

Postcode

Telephone  Fax

## Part C Child related activity details

Please tick appropriate box  for your child related activity

**For paid employees**

Type of child related activity

- residential facilities
- schools
- school boarding houses
- childcare
- churches, clubs and associations
- health counselling and support services
- private teaching, coaching and tutoring
- education programs outside of school
- child accommodation including homestays
- religious representatives
- sport and active recreation
- emergency services cadet program
- school crossing supervisors
- licensed care service

**For business operators/self employed individuals**

Type of child related activity

- health counselling and support services
- private teaching, coaching and tutoring
- education programs outside of school
- child accommodation including homestays
- providers of recreational activities
- operators of hostels for rural children
- director of a governing body of a non-state school
- licensed care service
- religious representatives (note, you must provide details of your religious entity/group for notification purposes)

Name of entity

Contact person

Postal address

Postcode

## Part C Child related activity details continued

**For family day care carers/occupants**  
Type of child related activity

family day care carer  
 family day care adult occupant

**For volunteers**  
Type of child related activity

residential facilities  
 schools  
 school boarding houses

**childcare**

centre based service  
 other commercial child care services  
 school age care service

churches, clubs and associations  
 health counselling and support services  
 private teaching, coaching and tutoring  
 education programs outside of school  
 child accommodation including homestays  
 religious representatives  
 sport and active recreation  
 emergency services cadet program  
 school crossing supervisors

**licensed care service**

volunteer of a licensed care service  
 volunteer working for a business providing services at a licensed care service

**For students**  
Type of child related activity

residential facilities  
 schools  
 school boarding houses

**childcare**

centre based service  
 other commercial child care services  
 school age care service

churches, clubs and associations  
 health counselling and support services  
 private teaching, coaching and tutoring  
 education programs outside of school  
 child accommodation including homestays  
 religious representatives  
 sport and active recreation  
 emergency services cadet program

**licensed care service**

student working at the licensed care service  
 student working for a business providing services at a licensed care service

## PART D Card holder's/Applicant's consent

(please read carefully before signing)

4 I consent to the Commission for Children and Young People and Child Guardian providing the following information to the authorised person nominated on this form:

- whether I have made an application for a blue card which is currently being processed;
- whether my blue card application has been or is subsequently withdrawn;
- whether I hold a current blue card;
- whether I have been issued with a negative notice;
- whether my blue card has been or is subsequently suspended;
- relevant information about any change in my police information which the Commissioner considers relevant to my child-related employment as provided for in the *Commission for Children and Young People and Child Guardian Act 2000*;
- notification of the final outcome of any assessment or reassessment of my application.

**Note:** making a misleading statement or providing a false document may attract a penalty under the *Commission for Children and Young People and Child Guardian Act 2000*.

Full name

Signature

Date  /  /   
DAY MONTH YEAR

### Privacy notice

The *Commission for Children and Young People and Child Guardian Act 2000* allows the collection of personal information to assess your eligibility to be issued with a blue card.

Information will be provided to Queensland Police, and may be provided to interstate or federal police, courts, prosecuting authorities or other authorised agencies to conduct criminal history checks. 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 where required by law.

Advice about your blue card's validity may also be provided through the Commission's online blue card verification process.

Please mail this completed document to:  
**Employment Screening Services**  
**Commission for Children and Young People**  
**and Child Guardian**

**Address:**

Level 17, 53 Albert Street  
Brisbane Qld 4000

**Postal:**

PO Box 12671  
Brisbane George Street Qld 4003

**Phone: 07 3211 6999 or freecall 1800 113 611**

**Fax: 07 3035 5910**

**www.bluecard.qld.gov.au**