



commission for  
children and young people  
and child guardian

								initials:
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# Paid employee blue card application form



This form is to be completed by paid  
employees proposing to start or continue  
in child related employment.



Valid for lodgement until  
30 June 2013

OFFICIAL USE ONLY	
A/C Code: BCD	Date:
Receipt number:	Officer:

## PART A Application and eligibility status

<p><b>1</b> Does this application relate to a:</p> <p><input type="checkbox"/> New applicant                      <input type="checkbox"/> Renewal</p> <p><b>2</b> Please record the blue/exemption card number (if known):</p> <table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table> / <table border="1"><tr><td></td><td></td></tr></table>																										<p><b>3</b> If you are eligible to apply for a blue card (please see <b>disqualified person</b> definition on page 4), continue to complete this application form. If not eligible, <b>do not</b> complete this form and complete an Eligibility Declaration form instead.</p>

## PART B Employer's details

<p><b>1</b> Name of employer/organisation</p> <table border="1"><tr><td></td></tr></table> <p>Organisation ID number (please insert the Commission's reference number for your organisation if known)</p> <table border="1"><tr><td></td></tr></table>			<p><b>6</b> Type of child-related employment Information about categories of child-related employment and whether any exemptions apply is available from <a href="http://www.bluecard.qld.gov.au">www.bluecard.qld.gov.au</a> (please tick appropriate category).</p> <p><input type="checkbox"/> child accommodation including homestays</p> <p><input type="checkbox"/> churches, clubs and associations</p> <p><input type="checkbox"/> education programs outside of school</p> <p><input type="checkbox"/> emergency services cadet program</p> <p><input type="checkbox"/> health, counselling and support services</p> <p><input type="checkbox"/> licensed care service</p> <p><input type="checkbox"/> local government</p> <p><input type="checkbox"/> private teaching, coaching or tutoring</p> <p><input type="checkbox"/> religious representatives</p> <p><input type="checkbox"/> residential facilities</p> <p><input type="checkbox"/> school boarding houses</p> <p><input type="checkbox"/> school crossing supervisors</p> <p><input type="checkbox"/> schools (other than registered teachers and parents)</p> <p><input type="checkbox"/> sport and active recreation</p>																												
<p><b>2</b> Postal address of employer/organisation</p> <table border="1"><tr><td></td></tr><tr><td></td></tr><tr><td></td></tr></table> <p>Postcode</p> <table border="1"><tr><td></td></tr></table>																															
<p><b>3</b> Contact person's name</p> <table border="1"><tr><td></td></tr></table>																															
<p><b>4</b> Contact person's position</p> <table border="1"><tr><td></td></tr></table>																															
<p><b>5</b> Phone    <table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table></p> <p>Fax         <table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table></p> <p>Email       <table border="1"><tr><td></td></tr></table></p>																															

## PART C Payment options (The application fee is GST exempt (under division 81), non refundable and subject to change.)

Please select one of the following payment methods:

Cash (over the counter transaction only)                       Cheque

Credit card (complete details below)                       Money order

**Cheque/money order payable to:**  
Commission for Children and Young People and Child Guardian  
ABN 51639217791

Name of credit card holder 

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 Number 

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Please charge \$73.45 to:  Mastercard     Visa

Cardholder's signature 

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                      Expiry date 

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 / 

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Applicant's Name 

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CCYPCG 12-805 004 MAY12

## PART D Applicant's details

1 Your title Mr  Mrs  Miss  Ms   
Other

2 Name you presently use

Family Name

First Name

Middle Name

I do not have a middle name (please tick)

3 Do you currently use an abbreviation/nickname/alias for your first name? *eg. Elizabeth abbreviation Betty*  
Name/s

4 Have you been known by any other name/s? *eg. name at birth, maiden name, name before marriage, married name, alias, change by certificate/deed poll, adoption, changed the order of your name*

**Note:** It does not matter how long ago you changed your name or how long you used another name for.

(Please tick) No  Go to next question

Yes  give details below:

If you require more space, please tick this box   
and attach a separate list

Family Name

First Name

Middle Name

Reason for change

5 Gender

Male  Female

6 Date of birth   
DAY MONTH YEAR

7 Place of birth

Town/City

State/Territory

Country

8 Current postal address

**(Note: your postal address must be in Australia)**

Postcode

9 Current residential address

Please tick if same as postal address

Postcode

10 Email

11 What language do you mainly speak at home?

12 Your telephone numbers

Daytime

Mobile

13 Do you identify as? (if applicable)

Aboriginal  Torres Strait Islander

Aboriginal and Torres Strait Islander

Australian South Sea Islander

14 Applicant's declaration

I declare:

- I am not disqualified from applying for a blue card# (see page 4)
- I am the applicant named in this form and have not omitted any names or aliases that I use or have used in the past;
- The information and identification documents provided by me for this application are true and correct and I understand it is an offence to provide false or misleading information;
- I have read the contents of this form including the information on page 4;
- I consent to the Commission obtaining any information from any police, court, prosecuting authority or other authorised agency and for the police, courts, prosecuting authority or other authorised agency to disclose any information, for the purposes of assessing my eligibility to work with children including ongoing checks while my application/blue card remains current;
- I understand that the information obtained includes but is not limited to details of convictions^ and pending or non conviction charges\* or information on the circumstances relating to offences committed or allegedly committed by me, regardless of when and where the offence or alleged offence occurred;
- I am proposing to start or continue in regulated employment and am not entitled to an exemption;
- I am aware of my blue card obligations as a blue card applicant/cardholder;
- I consent to the Commission publishing/providing confirmation on whether or not my blue card is valid; and
- I understand I may be contacted by the Commission by telephone, mail, email or any other contact detail provided.

**Sign inside the box without touching, or going outside the lines.**

Date of signature   
DAY MONTH YEAR

## PART E Proof of identity

The employer is responsible for sighting the applicant's identification documents.

### Identification requirements

The applicant must produce two original identification documents to confirm their identity. Together the documents must show:

- full name
- date of birth
- signature

The employer must check and declare that the details provided on the application form are the same as those appearing on the documents sighted.

**One of the following combinations must be used:**  
EITHER

List 1 + List 2

OR

List 1 + List 1

**Together the identification documents sighted must show the applicant's full name, date of birth and signature.**

Where the applicant resides more than 50km from the organisation's address or has a disability that affects his or her mobility, a prescribed person can sight their identification. If this applies, please complete the 'Identification verification by a prescribed person' form and submit it with this application.

**Irrespective of whether or not the employer can sight the identification documents, they must complete the 'Declaration by employer' part.**

All identification documents sighted must be originals (photocopies are not acceptable).

Where any document is in a former name, an original official document (eg. marriage certificate or change of name certificate) showing the change of name must be sighted.

**Please attach a photocopy of documents sighted to this application form for verification purposes.**

Please indicate which identification documents have been sighted by placing a  in the box.

#### LIST 1

##### SIGNATURE DOCUMENT

- Current driver licence/learner's permit/  
proof of age card (with photo)

Document No:

Issued in the state of:

- Current passport (with photo)

Passport No:

##### NON-SIGNATURE DOCUMENT

- Birth certificate (or extract)

Reference No:

- Proof of Australian citizenship or permanent residency

Reference No:

#### LIST 2

##### SIGNATURE DOCUMENT

- Current Pension Concession Card/Dept of Veterans' Affairs Entitlement Card/Senior's Health Card/Health Care Card/any other current financial entitlement card issued by Centrelink.

- Current Credit Card or account card from a bank/building society/credit union (with name and signature)

- Current Positive Notice Blue Card or Exemption Card (issued by the Commission)

- Current student identification card issued by a tertiary education institution or school (with photo and signature)

- Current Qld Gaming Machine Licence

##### NON-SIGNATURE DOCUMENT

- Current Medicare card

- Current Qld crowd controller/private investigator/security officer licence

- Passbook or account statement issued by a bank/building society/credit union dated in the last 6 months

- Australian taxation assessment notice dated in the last 6 months

- Current Qld Licence issued under the Weapons Act

## PART F Declaration by employer

It is an offence to provide false or misleading information to the Commission.

I declare that:

- 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); 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 because the cardholder/applicant resides more than 50km from the organisation's business address or has a disability that affects his or her mobility and have attached the 'Identification verification by a prescribed person 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.

Full Name

Signature

Position

Date

DAY MONTH YEAR

Applicant's Name

### 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 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 people

#### 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*
  - an offender prohibition order under the *Child Protection (Offender Prohibition Order) Act 2008*
  - a disqualification order issued by a court prohibiting them from applying for or holding a blue card
  - 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 the Commission to be declared eligible to apply for a blue card in certain limited circumstances.

For more about blue card system information and obligations go to [www.bluecard.qld.gov.au](http://www.bluecard.qld.gov.au)

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

#### Address:

Level 17, 53 Albert Street  
Brisbane Qld 4000

#### Postal:

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Brisbane George Street Qld 4003

Phone: 07 3211 6999 or 1800 113 611

Fax: 07 3035 5910

[www.bluecard.qld.gov.au](http://www.bluecard.qld.gov.au)