

Authorisation to confirm a valid blue card/application nominees and directors of a licensed care service

A nominee or director of a Licensed Care Service may complete this form to enable the Commission to advise the Department of Child Safety 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 Place of birth

Current postal address

Daytime contact no.

Blue card number Blue card expiry date

PART B Authorised party's details

Central Screening Unit (CSU)
Department of Communities (Child Safety Services)

PART C Child related activity details

Please tick the appropriate box for your child related activity

- Nominee of a Licensed Care Service
- Director of a Licensed Care Service

FOR CENTRAL SCREENING UNIT USE ONLY

This application will only be processed if it is certified and signed by the CSU.

CSU application number:

ICMS number:

CSU officer number:

CSU officer signature:

FOR DCHS ZONAL OFFICE USE ONLY

If this blue card application relates to an application for a licence for a new Licensed Care Service, please record the date the licence application was determined to be properly made by the department:

/ /

DAY MONTH YEAR

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 Department of Communities (Child Safety Services):
- 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 - whether my blue card application has been or is subsequently withdrawn;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 us to collect your personal information, which is assessed by commission staff to assess your application for a blue card.

Some of this information goes to Queensland Police, and may be sent to interstate or federal police to conduct criminal history checks. Information may also be given to:

- certain disciplinary bodies to get relevant disciplinary information about you
- your employer, any supervisory body, or other person you have authorised to discuss your application on your behalf. This enables us to update them on your blue card application and any changes to your blue card status.

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

Personal information will not be given to any other person or agency unless we have your permission or the disclosure is authorised or required by law.

Please mail this completed document to:
Manager, Community Support Team
at the Department of Child Safety Zonal Office
with responsibility for licensing your service