

SAFE NT

Phone 1800 723 368 (1800 SAFENT)

SAFE NT - NT Police

safent.police@nt.gov.au

GPO Box 39764 Winnellie NT 0821

Save time and APPLY ONLINE https://forms.pfes.nt.gov.au/safent/

Office Location

Ground Floor, 37 Woods Street Darwin

Opening Hours

Monday - Thursday 8.30am - 4.30pm Friday 9.30am - 4.30pm



NATIONAL POLICE CHECK

Email

Mail

Application for Criminal History Check and cons	sent to release Na	ational Police Cert	tificate.						
Date Received / / CNI		PN							
Receipt No (Police/TBC)	d at	Entered							
CHECK REQUIRED (this section must be complete	ted)								
FINGERPRINT & NAME CHECK* NAME C	CHECK NAM	E CHECK VOLUNTE	EER CONCESSIO	ON - Complete Section E					
*You must supply your fingerprints with this application. Fingerpr			olice stations by ap	pointment only.					
Call (08) 8985 8985 for information and bookings. Visit www.pfe SECTION A - DETAILS OF APPLICANT (thi									
Title: Mr Mrs Miss Ms		procou)	Sex:	Male Female					
Family name/surname									
First given name	Other	ner given name/s							
Daytime contact	Mobil	e number							
Email address									
Date of birth / / (dd/mn	n/yyyy)								
Place of birth Town / City	State		Country						
Other Names: Have you been known by any other name? eg. name before marriage, alias, changed by deedpoll.									
Maiden name Former name Also known as Give	n name/s		Surname						
OR OR									
	Given name/s		Surname						
OR									
Please attach a separate sheet to list other names that you have	e been previously know	n as.							
Australian Postal Address (Your National Police Certific PO Box number/Street number/Street name	cate will be mailed to th	is address) Suburb/town	State	Postcode					
Please check all details, including postcode, are correct. SAFE N	NT takes no responsibil	lity where undeliverable	information is provi	ided.					
Current Residential Address (must not be a PO Box or (A current residential address must be supplied		ess this application	n)						
Street number/Street name		Suburb/town	State	Postcode					
	Country								

Street number/Street name	Suburb/town	State	Postcode
Date from: (dd/mm/yyyy) / / Date to: / /	Country if outside Australia		
Street number/Street name	Suburb/town	State	Postcode
Date from: (dd/mm/yyyy) / / Date to: / /	Country if outside Australia		
Street number/Street name	Suburb/town	State	Postcode
Date from: (dd/mm/yyyy) / / Date to: / /	Country if outside Australia		
Please attach a separate sheet if you require further space to list other previous	residential addresses over the past 5 year	ars.	
SECTION C - PURPOSE OF CHECK			
This section must be completed. When compiling a National Police Certificate containing your crir check. If information is obtained from other police jurisdictions, the			
•	e relevant legislation or policy for	or that jurisd	liction, together wi
When compiling a National Police Certificate containing your crir check. If information is obtained from other police jurisdictions, the that of the Northern Territory is applied to the information before purpose of your check, which is listed on your certificate. Purpose / Occupation Only one purpose per check is permitted. Provide a brief description of the work you will be doing.	e relevant legislation or policy for the second to be the	or that jurisd	liction, together wi
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SAFE NT Form - National Police Check - REV 07/17 SECTION E - VOLUNTEER ORGANISATION DETAILS (this section must be completed by the volunteer organisation you will be working for) To be eligible for the Volunteer Concession fee this section must be completed by your employer/volunteer organisation. Name of organisation Postal address of organisation Daytime Contact phone number. Please tick if you require the original results of this check to be sent directly to the volunteer organisation listed above Note: only one certificate will be produced. Additional copies can be purchased - conditions apply. To be completed by CEO/Manager of Volunteer Organisation I certify that the person named on this form is a registered volunteer with this organisation and will receive no payment, benefit or financial gain from the work that they undertake on our behalf. Name/position Signature Date signed (dd/mm/yyyy) (Must be completed no earlier than 3 months from the date of application lodgement) SECTION F - PROOF OF IDENTITY **Proof of identity documentation** Applicants must attach a copy of a minimum of two (2) types of acceptable identification from the list below with a minimum of 100 points. Identification must include at least one type of photo ID (Category A) plus identification that contains the applicant's current residential address, signature and date of birth. All documents must be current or valid. Category A Category B You must have at least ONE Category A document 1. Passport (Australian/Foreign) = 70 points 7. Australian citizenship certificate = 70 points 2. Australian drivers licence = 40 points 8. Australian birth certificate = 70 points Firearms licence = 40 points 9. Centrelink cards = 40 points Tertiary student ID card with photo = 40 points 10. Government employee ID = 40 points 11. Statutory declaration as to identity 5. Australian evidence of age card (18+) = 40 points containing image of applicant = 40 points NT Ochre card = 40 points 12. Medicare card = 25 points

Add total points - must be 100 points or more minimum two (2) types of acceptable identification

NOTE: If insufficient ID is provided, the application will be returned unprocessed to the postal address provided.

13. Credit/debit card of financial

15. Bank statement

institution passbook = 25 points

Property rates notice/utilities notice

(with current residential address) = 25 points

(with current residential address) = 25 points

SECTION F - PROOF OF IDENTITY CONTINUED

Web:

www.pfes.nt.gov.au/safent

Complete the following section with details from two from at least one Category A document from the list a						
Category A document. Please identify document number	per from list above (1–6		ies of all ID must is application	t be attach	∍d	
Passport/licence/ID number						
State of Issue		Expi	ry Date	/	/	
Country of Issue						
Other document provided. Please identify document na This can be a second Category A document.	umber from list above	(1–15).				
Card/licence/membership/ID number						
State of Issue		Expi	ry Date	/		
Country of Issue						
In certain circumstances of hardship an application may be n For further information contact: safent.police@pfes.nt.gov.au		ability to vary the red	quirement for r	neeting 1	00 points.	
If you are under the age of 18, then one document from Grouthe school made by a Principal of that school will be sufficient			ting that you a	re a curre	ent student of	
SECTION G - CERTIFICATION AND STATEME	ENT OF CONSENT	AND INDEMNIT	Y (this section	must be	completed)	
I certify that I am the applicant named in this form and all the that I have or may have used previously. I have read and unc			I have not om	nitted nam	nes or aliases	
I consent to the release of details of any convictions, or oth <i>Records (Spent Convictions) Act 1992</i> , convictions that are and/or organisation listed on this form.						
I hereby indemnify the Northern Territory of Australia, against all liabilities and against all actions, suits, proceedings in respect of the release or use hereunder of any details of an	s, claims, demands, costs	s, and expenses wha	tsoever which	may be to	aken or made	
Name of applicant	ny convicuone, er curer i	mormación parporuns	, to ourier rolat	.0 .0 01	70170 1110.	
Signature		Date Signed				
		/	/			
		,	<u>, </u>			
Payment Options (current fees are available online - v	www.pfes.nt.gov.au/sa	fent)				
In person to SAFE NT Ground Floor, 37 Woods Street	et Darwin	Cash, Cheque	e/Money Ord	er/Credit	Card	
Via Mail to SAFE NT NT Police, PO Box 39764 WIN	INELLIE NT 0821	Cannot accept cash through mail Cheque / Money Order Credit Card (Visa/ Mastercard)				
Credit card authorisation						
I authorise SAFE NT to process my payment of \$		from my Visa/Mastercard.				
Cardholders name						
Card Number						
Expiry / /						
Cardholders signature						
Contact: Phone: 1800 723 368	Postal: SAI	FE NT - PO Box 39	9764 WINNE	LLIE NT	0821	

safent.police@nt.gov.au

Email: