## 

Department of

Education

## ATTACHMENT A

## PENDING CHARGES DECLARATION

Criminal history checks are administered by SAFE NT and detail whether a person has a criminal record. All mature age students who are over 18 years of age who have not enrolled in a school in the preceding 12 months must undertake a criminal history check at their own cost, prior to enrolment. They must also complete this form with the school principal as part of the enrolment process.

*This process does not applying to continuing students who turn 18 while they are studying*.

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| PART 1 | SCHOOL DETAILS (to be completed by the principal) | |
| School name: | | |
| Address: | | **Contact Phone**: |
| Principal details: | | |

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| PART 2 | PROSPECTIVE STUDENT DETAILS (to be completed by applicant) | | | | | |
| Title: | | **Gender:** | | | | |
| Given Name: | | | | **Middle names** (*if applicable*): | | |
| Family name: | | | | | | |
| Former given name: | | **Former middle name:** | | | **Former family name:** | |
| Current residential address: | | | | | | |
| Postal address (if different from above): | | | | | | |
| Telephone home: | | | **Mobile:** | | | **Work phone:** |
| Photographic proof of identity:  *(please list document/s sighted)* | | | **Document reference number:** | | | **Photocopy attached?**  **YES / NO** |

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| PART 3 | PENDING CHARGES | |
| Do you currently have any matters before the Court or have been charged with any offences?  YES / NO | | |
| If yes, please provide details: | | **Court Date:** |

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| PART 4 | TO BE COMPLETED BY THE STUDENT (IN THE PRESENCE OF THE PRINCIPAL)  Declaration: I declare that the information provide is true and correct and consent to the Department of Education obtaining my Criminal Record Report for the purposes of enrolment. | |
| Student full name: | | |
| Student signature: | | **Date:** |

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| PART 5 | TO BE COMPLETED BY THE PRINCIPAL  *Declaration: I have witnessed the above signature and sighted sufficient evidence to confirm the student’s identity* | |
| Principal name: | | |
| Principal signature: | | **Date:** |

*Confidentiality*

The Department of Education is committed to protecting the privacy of others and the protection of privacy of personal information in accordance with the Information Privacy Principles set out in the Northern Territory (NT) *Information Act.*