

Working with Children (Risk Management and Screening) Act 2000

Note: To preserve the confidentiality of your personal information, it is suggested that you authorise someone other than your employer/organisation.

1	Family name												
2	First name												
3	Middle name												
4	Date of birth	<div>D</div>	<div>D</div>	<div>M</div>	<div>M</div>	<div>Y</div>	<div>Y</div>	<div>Y</div>	<div>Y</div>				
5	Current postal address	<div></div>											
		<div></div>											
		<div></div>											
		<div>Postcode</div>											
6	Telephone	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>
7	Mobile	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>
8	Email	<div></div>											
9	Reference number / card number (<i>if known</i>)	<div></div>											

1	Family name										
2	First name										
3	Middle name										
4	Relationship to applicant										
5	Date of birth	<div><div></div><div></div></div> D D		<div><div></div><div></div></div> M M		<div><div></div><div></div><div></div><div></div><div></div><div></div></div> Y Y Y Y					
6	Current postal address										
	Postcode										
7	Telephone	<div><div></div><div></div></div>		<div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div></div>							
8	Signature										
9	Date of signature	<div><div></div><div></div></div> D D		<div><div></div><div></div></div> M M		<div><div></div><div></div><div></div><div></div><div></div><div></div></div> Y Y Y Y					

If there is any aspect named above that you do not wish to be discussed with the person you have approved, please outline this below.

[illegible]

Part D – Validity of consent

How long does this consent remain current?

Unless indicated below, your consent remains in place until you withdraw it. Please notify Blue Card Services if you wish to withdraw this consent.

☐ My consent remains valid for the purposes of my current application/outcome only

Part E Cardholder/applicant's declaration

I declare that:

- the details provided in this form are true and correct;
- I consent to Blue Card Services discussing the information in Part C relating to my card/application with the approved person nominated in Part B, and
- I understand that it is an offence to provide a false or misleading statement or document.

Signature of applicant/cardholder

D	D	M	M	Y	Y	Y	Y

Date of signature

Privacy Notice


The Department of Justice and Attorney-General (DJAG) is collecting your personal information under the *Working with Children (Risk Management and Screening) Act 2000*. Where relevant, DJAG will disclose personal information to organisations you work for or provide services to about whether you have a current application for, or hold a current blue/exemption card; the outcome of this application which may include its withdrawal or negative notice, or if your blue/exemption card is subsequently suspended or cancelled. DJAG publishes confirmation about whether your blue card is valid. DJAG will use and disclose your personal information to assess your application for a blue/exemption card and will disclose your personal information to courts, law enforcement agencies, disciplinary or supervisory bodies or anyone you have agreed for DJAG to discuss your application with. It may also be used to contact you with more information about your application and the Blue Card process. DJAG may use electronic communication for matters of information provision and collection of data for research purposes. DJAG manages your personal information in accordance with the *Information Privacy Act 2009*.


Blue Card Services, Department of Justice and Attorney-General

 Scan and upload at www.bluecard.qld.gov.au/uploadform

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 53 Albert Street, Brisbane QLD 4000

 07 3211 6999 or 1800 113 611

 07 3035 5910

 www.bluecard.qld.gov.au