

Consent to Police Check

It is a requirement of both Federal and State Government Departments that procedures of accountability to consumers are carried out. It is required that all potential staff and volunteers applying for a position with Inner West Neighbour Aid Inc. complete this form.

We request your signature to confirm your understanding of the purpose and procedure of the police check. If there is a previous criminal record we will discuss the matter further with you.

Declaration of Criminal Convictions
(excluding traffic offences)

I declare that I have: *(please delete as appropriate)*

no criminal convictions

the following criminal convictions

the following pending criminal court action

Details _____

(If you have a conviction or pending criminal action, please discuss this with the Coordinator)

First Name: _____

Family Name: _____

Maiden Name/Past Alias (if any): _____

Date of Birth (dd/mm/yy): _____

Place of Birth: _____

Country of Birth: _____

Signature: _____ **Date:** _____