

CONFIRMATION of Aboriginal and/or Torres Strait Islander Descent Form

This *Confirmation of Aboriginal and/or Torres Strait Islander Descent Form* must be completed by the applicant and a recognised incorporated Aboriginal and/or Torres Strait Island organisation as a prerequisite to applying for a position within the Department of Community Safety.

This is a compulsory process implemented to ensure that only people who are of Aboriginal and/or Torres Strait Islander descent receive access to specified employment programs and incentives to which they are entitled, and also in ensuring that people who are not of Aboriginal and/or Torres Strait Islander descent do not receive them.

The Department of Community Safety recognises that there may be some circumstances where it is difficult for people to obtain confirmation of Aboriginal and/or Torres Strait Islander descent. If this applies, or assistance or advice in completing this form, the Human Resource Branch can be contacted on (07) 3109 5027.

Note: Each Aboriginal/Torres Strait Islander applicant must complete a separate form.

SECTION 1 – To be completed by the applicant

I, _____ (full name)

(if you are also known by any other name please provide details: _____ i.e. (maiden name, community or traditional name)

of _____ (address)

Make the following declaration (tick all statements that apply):

- I am of Aboriginal descent
- I am of Torres Strait Islander descent
- I identify as an Aboriginal person
- I identify as a Torres Strait Islander
- I am accepted as such by the # _____ Community in which I currently live
- I am accepted as such by the # _____ Community in which I formerly lived for ____ years.

(# Insert name of Community)

SECTION 2 – To be completed by a recognised Aboriginal and/or Torres Strait Island organisation

**Organisation's Common Seal
to be affixed below**

It is hereby confirmed that above named applicant has provided sufficient evidence to indicate that he/she is recognised as being of Aboriginal and/or Torres Strait Islander descent.

Resolution number: _____ Date of meeting ____ / ____ / ____

Signature: _____ (Authorised signatory)

PRINT NAME: _____

Signature: _____ (Authorised signatory)

PRINT NAME: _____

**** ALL SECTIONS MUST BE COMPLETED ****

This form will only be deemed complete if it bears the common seal of a recognised incorporated Aboriginal and/ or Torres Strait Islander organisation.

GUIDELINES FOR RECOGNISING ORGANISATIONS

Community organisations considering whether to certify the Aboriginality or Torres Strait Islander descent of applicants should appreciate that they bear a heavy responsibility in both ensuring that only people who are Aboriginal persons or Torres Strait Islanders receive benefits to which they are entitled, and also in ensuring that people who are not Aboriginal persons or Torres Strait Islanders do not receive them.

Community organisations whose confirmation will usually be acceptable are:

- (a) an Aboriginal or Torres Strait Islander association incorporated under Part IV of the *Aboriginal Councils and Associations Act 1976* or
- (b) an incorporated community organisation where all the members of the governing body are Aboriginal persons or Torres Strait Islanders or both.

Such confirmation must be approved by a resolution at a formal meeting of the organisation's governing body and the record of such resolution is to be sealed with the Common Seal of the organisation and signed by the authorised signatories.

Organisations should not provide confirmation unless they have evidence before them that the applicant is an Aboriginal or Torres Strait Islander person, that he or she identifies as an Aboriginal or Torres Strait Islander and that the applicant has community recognition.