

Working with Children Check Notification of Change of Personal Details Form



To advise of your change of personal details please complete this notification form and post it to:

Working with Children Check Unit
GPO Box 1915
MELBOURNE VIC 3001

The information you provide on this form will be used to update your record.

If you have changed your name or need a replacement card please use the **Replacement Card Application Form** which is available for printing from the Working with Children (WWC) Check web site at www.justice.vic.gov.au/workingwithchildren or by contacting the WWC Check Information Line on 1300 652 879.

Privacy Statement

The Department of Justice is bound by Victorian privacy laws (*Information Privacy Act 2000 and Health Records Act 2001*). The personal information you provide will be used to update your record and to monitor your continuing suitability to work with children. This information may also be disclosed to other agencies, including police services in Australia and the Victorian Institute of Teaching, as provided for in the *Working with Children Act 2005*. If you do not provide all relevant personal details, we may not be able to process your request. For further information about accessing your personal information or our full privacy statement please refer to the website at www.justice.vic.gov.au/workingwithchildren or contact the Information Line on 1300 652 879.

Reason for Notification

I would like to (cross all that apply)

- | | | |
|-------------------------------------|--|----------------------------|
| <input checked="" type="checkbox"/> | Update my address | Complete Section 1,2 and 5 |
| <input checked="" type="checkbox"/> | Update my contact phone numbers | Complete Section 1,3 and 5 |
| <input checked="" type="checkbox"/> | Update my employer or organisation details | Complete Section 1,4 and 5 |

Please print in black pen within the boxes in block letters.

Section 1 Your Details

| | |
|---|--|
| Title (eg. Mr, Ms, Mrs, Miss, Dr) | Family Name (Surname) |
| <input type="text"/> | <input type="text"/> |
| First Name and Middle Name/s | |
| <input type="text"/> | |
| Gender: <input checked="" type="checkbox"/> Male <input checked="" type="checkbox"/> Female | Date of Birth: <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> |
| Current Card/Application Receipt Number | <input type="text"/> |

Section 2 Current Address

| | |
|--|----------------------|
| Residential Address | <input type="text"/> |
| <input type="text"/> | <input type="text"/> |
| Suburb/Locality | State Postcode |
| <input type="text"/> | <input type="text"/> |
| Postal Address (if different to above) | <input type="text"/> |
| <input type="text"/> | <input type="text"/> |
| Suburb/Locality | State Postcode |
| <input type="text"/> | <input type="text"/> |

Section 3 Current Contact Phone Numbers

| | |
|---------------------------|-----------------------|
| Home Contact Phone Number | Mobile Contact Number |
| <input type="text"/> | <input type="text"/> |
| Work Contact Phone Number | |
| <input type="text"/> | |

Section 4 Current Employer/Volunteer Organisation Details

Please list **all** organisations with whom you are currently undertaking child-related work. This will update your record and any previous organisations you have listed will be deleted.

Name of Other Organisation

Street Address

Suburb/Locality State Postcode

Employer/Volunteer Organisation HR Manager Contact Phone Number

Name of Other Organisation

Street Address

Suburb/Locality State Postcode

Employer/Volunteer Organisation HR Manager Contact Phone Number

Name of Other Organisation

Street Address

Suburb/Locality State Postcode

Employer/Volunteer Organisation HR Manager Contact Phone Number

If updating your employer details above, please advise below all of the types of child related work in which you currently work or volunteer or intend to work or volunteer and your status ie. volunteer or employee (self-employed) (the Table of Child-Related Work Areas is available at the Working with Children Check Website www.justice.vic.gov.au/workingwithchildren).

| Code Number | Volunteer | Employee | Code Number | Volunteer | Employee |
|----------------------|-------------------------------------|-------------------------------------|----------------------|-------------------------------------|-------------------------------------|
| <input type="text"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="text"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |
| <input type="text"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="text"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |

Section 5 Declaration

I declare that the information I have provided on this form is true and correct.

Your signature



Date

It is a criminal offence under section 39 of the *Working with Children Act 2005* to provide false or misleading information in relation to an application for a Working with Children Check.

OFFICE USE ONLY

Date received

Incomplete - date returned

Date entered

Entered by