



Blue Card Services  
**Working with children –  
Organisation advice**

*Working with Children (Risk Management and Screening) Act 2000*

**C66**

Use this form to tell Blue Card Services about a person's involvement with your organisation or business.

### 1. Organisation's details

Name of organisation	<input type="text"/>
Organisation ID (if known):	<input type="text"/>
Full name:	<input type="text"/>
Contact number:	<input type="text"/>
ABN:	<input type="text"/>

### 2. Identified person's details

First name <input type="text"/>	Middle name <input type="text"/>	Last name <input type="text"/>
Date of birth <input type="text"/>	Reference number <input type="text"/>	

The identified person is:

- |  |  |   |
|--|--|---|
| <input type="checkbox"/> a suspended card holder | <input type="checkbox"/> a cancelled card holder | <input type="checkbox"/> a negative notice holder |
| <input type="checkbox"/> a disqualified person   | <input type="checkbox"/> a withdrawn person      |   |

### 3. Information regarding the person's engagement

Is the person still working/volunteering/studying with your organisation?

- ☐ Yes. Select all that apply
- ☐ Volunteer
  - ☐ Student
  - ☐ Paid employee
- ☐ No. Please specify their end date  — go to **Part 6** (declaration)

### 4. Engagement status

Is this person currently on leave, suspended or have they been stood down?

- ☐ No
- ☐ Yes

What is their position title?	<input type="text"/>
What are their duties with children?	<input type="text"/>
What is their end date?	<input type="text"/>
Go to <b>Part 6</b> (declaration)	

## 5. Information regarding the person's engagement

Please answer all questions

Is the person working or volunteering with children?

☐ Yes

☐ No

Is the person a student carrying out placement with children or young people?

☐ Yes

☐ No

Does the person make decisions about the child-related activities or services of the organisation?

☐ Yes

☐ No

Is the person a committee, board, executive member or director?

☐ Yes

☐ No

Is the person a sub-contractor?

☐ Yes

☐ No

ABN:

Is the person relying on one of the exemptions below?

☐ No

☐ Yes, *select all that apply*

- ☐ a parent volunteering
- ☐ a volunteer who is under 18
- ☐ working with children for no more than 7 days in a calendar year
- ☐ a person with disability who is employed at a place where they also receive disability services or NDIS support services
- ☐ a secondary school student on work experience who carries out disability-related work under the direct supervision of a person who holds a blue or exemption card

Is the person any of the following?

☐ No

☐ Yes, *select all that apply*

- ☐ a Registered Teacher
- ☐ a Queensland Police Officer
- ☐ a Registered Health Practitioner

Does the person enter any of the below places while children are present?

- ☐ Childcare or day care, outside school hours care facilities
- ☐ Residential facilities, youth detention centres
- ☐ School boarding facilities
- ☐ None of the above

## 5. Organisation's declaration

I declare that:

- the details provided in this form are true and correct;
- I am the organisation's representative and authorised to submit this information on behalf of the organisation;
- I understand that it is an offence to provide a false or misleading statement or document;  
*maximum penalty — 100 penalty units or 2 years imprisonment*
- I will confirm with Blue Card Services if a blue card is required BEFORE commencing the identified person; and
- if engaging the identified person in non-regulated activities, I will ensure:
  - o the individual's blue card status is recorded on our organisation's employee register; and
  - o our Child and Youth Risk Management Strategy is being implemented to ensure children's safety and wellbeing.

Signature of representative

Name of representative

Position of representative

Date of signature

### Privacy notice

The *Working with Children (Risk Management and Screening) Act 2000* allows the collection of information to assess the eligibility of individuals to be issued with a blue/exemption card, to provide relevant notifications to their child-related organisation and to audit and monitor compliance of individuals and organisations. Information submitted will only be used for the purpose of administering the blue card system and may be provided to other persons or agencies with consent or where required by law.

**Blue Card Services, Department of Justice**

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☎ 07 3211 6999 or 1800 113 611

🖱 [www.qld.gov.au/bluecard](http://www.qld.gov.au/bluecard)