

**DVA Pre-Commencement Check Package (Applicant)**

(Pack includes this DVA specific form and separate ACIC\* NPCS informed consent form)

**Introduction**

Your cooperation in completing this pre-commencement check pack will allow the Department to assess you (the applicant), prior to commencement, for suitability to be provided with (unescorted or under limited supervision) **access** to DVA's people, information or assets (including non-public premises, official information, ICT systems) and be permitted to escort visitors. This checking process is a mandatory requirement as detailed in the DVA Personnel Security Protocol. Information provided by you is protected under the Privacy Act 1988 (Cth).

**Instructions**

The fields in these forms can be filled out electronically, saved (if required) and printed. Signatures are to be in ink. Once completed the package, including this DVA specific form, separate NPCS informed consent form and proof of identity is to be returned by email (as scanned attachments) to your DVA point of contact. Alternate delivery arrangements may be organised through your DVA point of contact if necessary. **Incomplete or unclear material will be returned to you for correction and resubmission. The pre commencement process will not commence until all relevant information is received. Late or incomplete submission may delay your commencement with DVA.**

**Witnesses and Certification**

A witness to your signature, as required on the "declaration" or "consent" forms, is to be another non-dependant adult over the age of 18 years. Certified true copies of original documents must be completed by an [authorised witness](#). The following information must be present on each certification:

- full name, qualification, contact details of certifier,
- signature of the person making the certification,
- full date of certification, and
- a clear statement e.g.: "I certify that this document is a true copy of the original which I have sighted".

**NPCS Informed Consent Form**

An ACIC\* National Police Checking Service (NPCS) Informed Consent Form is a part of this package and must be completed. When completing this form you **must not** complete the sections marked in **red** and you **must** pay particular attention to detail required under each heading and entry marked in yellow.

**Citizenship and Checkable Background**

The Department does not **routinely** permit **access** for non-Australian citizens or persons who cannot provide a viable checkable background. You must advise DVA of your citizenship status if you are not an Australian citizen. DVA will utilise information you have provided to determine the status of your checkable background.

Comment:

**Australian Government Security Clearance**

Some nominated positions or roles in DVA may require the occupant to hold an Australian Government security clearance. If you have ever been the subject of an Australian Government security clearance process please advise DVA in the comments box below. Further info is available at:

<http://www.defence.gov.au/agsva/>

Comment:

\*ACIC - Australian Criminal Intelligence Commission

**General Consent**

*Declaration - I understand the requirement for me to be subject to a pre-commencement check. I acknowledge that this process requires the Department to seek various declarations from me and to make various enquiries to formulate a suitability personnel security risk assessment. These enquiries include a search of national police records, collecting information regarding workplace disciplinary matters and checks of Australian work rights. I consent to the Department having access to relevant information about me that will assist in making decisions about my suitability for access to DVA premises and information.*

**Full name:**

**Signature of Applicant:**

**Date:** (dd/mm/yyyy)

**Witness to Applicants Signature**

**Full name:**

**Signature of Witness:**

**Date:** (dd/mm/yyyy)

If applicant is currently under the age of 18 Years a Parent or Guardian must provide their consent:

**Full Name of Parent or Guardian:**

**Signature of Parent or Guardian:**

**Date:** (dd/mm/yyyy)

**Acknowledgement of Official Secrecy**

As a Commonwealth officer (including a person who provides services to the Commonwealth) you are required to acknowledge your understanding of the: [CRIMES ACT 1914 - SECT 70 Disclosure of information by Commonwealth officers](#)

1. A person who, being a Commonwealth officer\*, publishes or communicates, except to some person to whom he/she is authorised to publish or communicate it, any fact or document which comes to his/her knowledge, or into her/his possession, by virtue of being a Commonwealth officer, and which it is her/his duty not to disclose, shall be guilty of an offence.
2. A person who, having been a Commonwealth officer, publishes or communicates, without lawful authority or excuse (proof whereof shall lie upon her/him), any fact or document which came to his/her knowledge, or into his/her possession, by virtue of having been a Commonwealth officer, and which, at the time when he/she ceased to be a Commonwealth officer, it was her/his duty not to disclose, shall be guilty of an offence.

Penalty: Imprisonment for 2 yrs.

Declaration - I understand that all official information that will or has been acquired by me in the course of my employment with the Commonwealth which it is my duty not to disclose is not to be published or communicated to any unauthorised person in any form either during or after my service in or with the Commonwealth.

Full name of applicant:

Signature of Applicant:

Date: (dd/mm/yyyy)

**Witness to Applicant's Signature**

Full name:

Signature of Witness:

Date: (dd/mm/yyyy)

**If applicant is currently under the age of 18 Years a Parent or Guardian must provide their consent**

Full Name of Parent or Guardian:

Signature of Parent or Guardian:

Date: (dd/mm/yyyy)

**Declaration of Criminal History, Ongoing Legal Proceedings or Employment Related Disciplinary Matters**

The Department will conduct a check of national police records for any disclosable court outcomes that relate to you. In addition to this record search you should declare any ongoing legal (including criminal or litigation) proceedings or employment related disciplinary matters that relate to you. The existence of any of these matters may not necessarily preclude you from being found suitable for commencement. However withholding these declarable matters from the Department and/or the subsequent discovery of undeclared matters may necessitate the Department to deny access to protect its business.

Please answer the following questions (1 to 4) by ticking the applicable response box. If you have responded "Yes", a DVA representative will contact you to discuss the background of your response.

1. *Do you have any adult Commonwealth or Territory convictions which are less than 10 yrs old? And/or do you have any juvenile Commonwealth or Territory convictions which are less than 5 yrs old?*

**No**  **Yes**

2. *Do you have any convictions for Commonwealth or Territory offences which are over 10 yrs old (or 5 yrs for juvenile convictions), where the sentence imposed was imprisonment for a period greater than 30 months?*

**No**  **Yes**

3. *Are you currently the subject of/or applicant in any pending court matters?*

**No**  **Yes**

4. *Are you currently the subject of any current unresolved employment related disciplinary processes?*

**No**  **Yes**

**Declaration** - *I declare that I understand my responsibilities in regard to this declaration and that the information I have provided in this declaration of criminal history, on-going legal proceedings or employment related disciplinary matters form is correct. I confirm that I understand that the provision of false or misleading information might result in lengthy delays in the processing of this check, or a decision to refuse access to DVA premises or information.*

**Full name:**

**Signature of Applicant:**

**Date:** (dd/mm/yyyy)

If applicant is currently under the age of 18 Years a Parent or Guardian must provide their consent

**Full Name of Parent or Guardian:**

**Signature of Parent or Guardian:**

**Date:** (dd/mm/yyyy)