



- An application must be submitted in person or by mail.

**Post:**

Teachers Registration Board of South Australia  
PO Box 3649  
RUNDLE MALL SA 5000

OR

**In person:**

Teachers Registration Board of South Australia  
Level 6, 70 Pirie Street  
ADELAIDE SA 5000

- Applications submitted by email will **not** be accepted.
- An **incomplete** application will not be accepted and will be returned to you.

### Documentation or information checklist

**You must provide the following items with your application**

- |  |                          |
|--|--------------------------|
| 1. A certified copy of your full birth certificate   | <input type="checkbox"/> |
| 2. A certified copy of a document with photographic identification (i.e. passport or driver's licence).  | <input type="checkbox"/> |
| 3. A certified copy of your certificate of completion for a 7-hour Mandatory Notification Training course (also known as Responding to Abuse & Neglect: Education and Care' (RAN) or 'Child Safe Environments: Reporting Abuse and Neglect' (CSE)).  | <input type="checkbox"/> |
| 4. Proof of identity for special authority to teach<br><b>Minimum identity requirements</b><br>You must provide <b>four</b> documents with your completed form to confirm your identity: <ul style="list-style-type: none"> <li><b>one</b> from <i>Commencement documents</i> to confirm your birth in Australia or arrival in Australia</li> <li><b>one</b> from <i>Primary documents</i> and</li> <li><b>two</b> from <i>Secondary documents</i> to show the use of your identity in the community.</li> </ul> Please see the next page for the list of available documents that you can use for identity requirements.<br>You may be able to use item 1 and 2 from the checklist above to meet part of the ID requirements. | <input type="checkbox"/> |
| <b>If applicable</b> , you must also provide the following items:  |                          |
| 1. A certified copy of evidence of all name changes e.g. marriage certificate, decree nisi, deed poll, etc   | <input type="checkbox"/> |
| 2. An original or certified copies of national overseas criminal history record checks issued within the last 12 months from the countries you declared in question 4.9 on page 2 of the application form. You must obtain this documentation before lodging this application with the Board. These checks must reflect all names by which you have ever been known.   | <input type="checkbox"/> |

**Please note:**

- All documentation supplied in support of your application must be the **original** or a **certified copy**.
- Copies of original documents **must be certified by the same Justice of the Peace**.
- Each document submitted for certification must be a photocopy with the original document available for sighting at the time of certification.
- In some circumstances the Board may require presentation of an original document.
- If all documents have not been correctly certified, the application will not be accepted and will be returned to you.
- All documents in a language other than English lodged as part of an application for a special authority must be submitted with official certified English translations. (refer to NAATI website [www.naati.com.au](http://www.naati.com.au)).

**4x Identity Documents required:**

**1x Commencement document:** \_\_\_\_\_

- (a) full Australian birth certificate (not an extract or birth card)
- (b) current Australian passport (not expired)
- (c) Australian Visa current at time of entry to Australia as a resident or tourist
- (d) ImmiCard issued by the Department of Home Affairs (formerly Department of Immigration and Border Protection) that enables the cardholder to prove their visa and/or migration status and enrol in services
- (e) certificate of identity issued by the Department of Foreign Affairs and Trade to refugees and non-Australian citizens for entry to Australia
- (f) document of identity issued by the Department of Foreign Affairs and Trade to Australian citizens or persons who possess the nationality of a Commonwealth country, for travel purposes
- (g) certificate of evidence of resident status in Australia

**1x Primary document:** \_\_\_\_\_

- (a) current Australian driver's licence, learner permit or provisional licence issued by a state or territory, showing signature and/or photo and the same name as claimed
- (b) Australian marriage certificate issued by a state or territory (*church or celebrant-issued certificates are **not** accepted*)\*
- (c) current passport issued by a country other than Australia with a valid entry stamp or visa
- (d) current proof of age or photo identity card issued by an Australian government agency in your name with photo and signature
- (e) current shooter or firearm licence showing signature and photo (not minor or junior permit or licence)

**\*Change of name**

- If you provide identity documents using a former name, you **must** provide evidence of your name change. This means providing a change of name certificate issued by the Australian Registry of Births, Deaths and Marriages or an Australian marriage certificate issued by a state or territory or a decree nisi, **in addition to** your four identity documents. (*ie if you use your marriage certificate for name change purposes, you **cannot** use it for ID*).
- If your change of name documents were issued in a country other than Australia please contact the Board.

**2x Secondary documents:** \_\_\_\_\_  \_\_\_\_\_

- (a) certificate of identity issued by the Department of Foreign Affairs and Trade
- (b) document of identity issued by the Department of Foreign Affairs and Trade
- (c) convention travel document secondary (United Nations) issued by the Department of Foreign Affairs and Trade
- (d) foreign government issued documents (for example driver's licence)
- (e) Medicare card
- (f) enrolment with the Australian Electoral Commission
- (g) security guard or crowd control photo licence
- (h) evidence of right to a government benefit (Centrelink or Veterans Affairs)
- (i) consular photo identity card issued by the Department of Foreign Affairs and Trade
- (j) photo identity card issued to an officer by a police force
- (k) photo identity card issued by the Australian Defence Force
- (l) photo identity card issued by the Australian Government or a state or territory government
- (m) Aviation Security Identification Card
- (n) Maritime Security Identification card
- (o) Australian tertiary student photo identity document
- (p) certified academic transcript from an Australian university\*

**\*Only an official academic transcript can be used as an ID**

## APPLICATION FOR A SPECIAL AUTHORITY FOR AN UNREGISTERED PERSON TO TEACH AS AN EXCHANGE TEACHER

### SECTION 1 - 6 : To be completed by the the Exchange Teacher

#### 1. NOMINATED APPLICANT

##### PERSONAL DETAILS

Title (Mr/Mrs/Ms/Dr/Other)	Preferred Name: (for correspondence)*
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\*If your preferred name is different from your first name, you **must also declare** that name on the *Nationally Coordinated Criminal History Check Application and Informed Consent Form*.


FULL NAME:	
Family/Surname	Given Name(s)

Do you identify as an Aboriginal or Torres Strait Islander?      Yes       No  (please tick)

Address for correspondence (your postal address)

Telephone	Mobile
Email	

Please provide your current Department of Human Services (previously known as Department for Communities and Social Inclusion) Child Related Screening Clearance or your Working with Children Check.

 Attach a certified copy of your Child Related Screening Clearance.

Please provide the full name the clearance or check was issued in.

Date of Issue	Day	Month	Year	Reference or Unique Identification Number	
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#### 2. NATIONALLY COORDINATED CRIMINAL HISTORY CHECK

Have you, at any time in the past, visited Australia?      Yes       No  (please tick)

If you have answered **YES** to the question above, then you must complete and attach the provided Australian Nationally Coordinated Criminal History Check (NCCHC) together with the \$25 NCCHC fee. This application cannot be considered until both the consent form and fee are provided.

#### 3. MANDATORY NOTIFICATION TRAINING REQUIREMENT

Refer to the Guideline booklet at: [www.trb.sa.edu.au/trb-sae-guidelines](http://www.trb.sa.edu.au/trb-sae-guidelines).



Attach a certified copy of your certificate of completion for a 7-hour Mandatory Notification Training course.

#### 4. DECLARATIONS - FITNESS AND PROPRIETY

You must complete all items in this section.

- 4.1 Have you ever had registration, licensing, classification or other authority as a teacher suspended, cancelled or withdrawn in Australia or in any other country? Yes  No
- 4.2 Are you subject to any conditions in practising the profession of teaching in any state, territory or country? Yes  No
- 4.3 Have you ever been refused registration, licensing or classification as a teacher in Australia or any other country? Yes  No
- 4.4 Have you ever been (or are you currently) the subject of disciplinary proceedings or any action that might lead to such proceedings in any jurisdiction? Yes  No
- 4.5 Have you ever been dismissed or resigned from employment as a practising teacher in response to or following allegations of unprofessional conduct in any jurisdiction? Yes  No
- 4.6 Have you ever been dismissed or resigned from any employment in response to or following allegations of improper conduct relating to a child in any jurisdiction? Yes  No
- 4.7 Do you have an injury, illness or disability which (either now or in the proposed term of registration):
  - a. May affect your capacity to discharge all of the duties and responsibilities of an unregistered person to teach safely and competently? Yes  No
  - b. May require the provision of special equipment, assistance or arrangements in order to ensure that you can carry out all of the duties and responsibilities of an unregistered person to teach safely and competently? Yes  No

Note: The Teachers Registration Board is required, when considering applications for special authority, to comply with State and Federal equal opportunity legislation. The above information is required to enable the Board to carry out its statutory functions, but will not be used to discriminate unlawfully against any applicant.


- 4.8 Have you ever been charged with or convicted of an offence/s in the following categories:
  - An offence for which a term of imprisonment is a penalty (whether or not a penalty of imprisonment was imposed), OR
  - Any offence involving illicit drugs, violence, sexual or indecent behaviour, dishonesty, cruelty to animals?
 Yes  No

If you have answered YES to any of the above questions, please provide written details of the circumstances relating to the matter in a separate envelope addressed to the Registrar and marked "Confidential". All matters are considered on an individual basis. You may be required to provide further documentation or participate in an interview.

- 4.9 Have you resided in any country other than Australia for more than 12 continuous months during the past 10 years when over 18 years of age? Yes  No

If you have answered YES to Question 4.9, please list the country/countries that you have resided in.

Countries in which I have resided

 Attach the original or certified copies of national overseas criminal history record checks issued within the last 12 months from the above countries. You must obtain this documentation before lodging this application with the Board. These checks must reflect all names by which you have ever been known.

The Board will only accept certain national overseas criminal history record checks for the purpose of granting a special authority to teach. Applicants should therefore refer to the instructions for obtaining acceptable checks which are available on the Board's website at [www.trb.sa.edu.au/ochrc](http://www.trb.sa.edu.au/ochrc).

All documents in a language other than English lodged as part of an application for a special authority to teach must be submitted with official certified English translations. Refer to [www.trb.sa.edu.au/documentation](http://www.trb.sa.edu.au/documentation).

OFFICE USE ONLY

Processed:  Yes  No    Cleared by:     Date:

### 5. STATUTORY DECLARATION

The following Statutory Declaration refers to your Application for a Special Authority for an Unregistered Person, attached documents, and any other supporting information.

Your signature on this page must be witnessed by a Justice of the Peace.

The Board cannot accept Statutory Declarations witnessed by any other authority. The same Justice of the Peace must also certify all copies of original documents supplied with the application.

I \_\_\_\_\_ do solemnly and sincerely declare  
(print your name)

that I have read and understand the information contained herein and my answers to the information required herein, together with information contained in any documents forwarded herewith, are true and correct and I make this solemn declaration, conscientiously believing it to be true and by virtue of the provisions of the *Oaths Act, 1936*. I am aware that an application which is false or misleading in any material particular can lead to prosecution under the *Oaths Act, 1936*.

In addition, I understand that, pursuant to Sections 54 and 55 of the *Teachers Registration and Standards Act 2004*, a person must not make a statement that is false or misleading in a material particular (whether by reason of the inclusion or omission of any particular) in any information provided under this Act, and that a person who by fraud or any other dishonest means procures registration for himself or herself, or for another person, is guilty of an offence. I am aware that an application which is false or misleading in any material particular can lead to refusal or cancellation of my teacher registration pursuant to the *Teachers Registration and Standards Act 2004*. Maximum penalty: \$10 000.

\_\_\_\_\_  
(Applicant's Signature)

Declared before me at \_\_\_\_\_ this \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_

I verify that all photographs contained within the documents certified by me are, to the best of my ability, photographs of the applicant.

Name \_\_\_\_\_

Address \_\_\_\_\_

Signed \_\_\_\_\_

Justice of the Peace Details including Licence number \_\_\_\_\_

### 6. DOCUMENT VERIFICATION SERVICE CONSENT

The TRB uses the Commonwealth Document Verification Service to verify identity documents, for more information please visit the Australian Attorney-General's Department Document Verification Service website ([www.dvs.gov.au](http://www.dvs.gov.au)).

Any ID provided for this application (pages 1 to 7) requires consent as follows:

I confirm that I am authorised to provide the personal details presented and I consent to my information being checked with the document issuer or official record holder via third party systems for the purpose of confirming my identity.

Applicant's Signature \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_

**SECTION 7 - 9 : To be completed by the Employer in South Australia**

**7. SOUTH AUSTRALIAN SITE LOCATION DETAILS**

Site name		
Address		
Telephone	Fax	Email

**8. SOUTH AUSTRALIAN TEACHING POSITION DETAILS**

Fraction of time (F/T, P/T, Hours)	Period of Employment (start date and finish date)

**9. EMPLOYER DECLARATION**

I am of the opinion that the exchange teacher \_\_\_\_\_ referred to in the application to the Teachers Registration Board of South Australia for a Special Authority to Teach as an Exchange Teacher (as per the Board policy statement), has the appropriate skills and abilities and is a fit and proper person to teach in South Australia, pursuant to the *Teachers Registration and Standards Act 2004*.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Full Name (print) \_\_\_\_\_ Position \_\_\_\_\_

Name of Employing Authority \_\_\_\_\_

Address of Employing Authority \_\_\_\_\_

Employer's Telephone Number \_\_\_\_\_

Employer's Email Address \_\_\_\_\_

**10. PAYMENT DETAILS**

<p><b>OFFICE USE ONLY</b></p> <p>Registration No. <input style="width: 100%;" type="text"/></p> <p>New Applicant <input type="checkbox"/></p> <p>Expired Reg. <input type="checkbox"/></p> <p><input style="width: 100%;" type="text"/></p> <p><input style="width: 100%;" type="text"/></p> <p><input style="width: 100%;" type="text"/></p> <p><input style="width: 100%;" type="text"/></p>	<p>The total fee for this application is \$135 (Nationally Coordinated Criminal History Check fee of \$25 plus one year Special Authority fee of \$110.)</p> <p>An EFTPOS machine is available in the office reception until 4:00pm weekdays. We do not accept cash or electronic bank transfers. Payment will be processed at the time you submit your <b>complete</b> application.</p> <p>Payment of fees can be made by either of the following:      cheque <input type="checkbox"/>      money order <input type="checkbox"/></p> <p>or, I authorise the Teachers Registration Board to draw on my      Visa <input type="checkbox"/>      Mastercard <input type="checkbox"/></p> <p>Signature: <input style="width: 150px;" type="text"/>      Expiry Date: <input style="width: 50px;" type="text"/> / <input style="width: 50px;" type="text"/></p> <p>Cardholder Name: <input style="width: 150px;" type="text"/>      Amount: \$ <input style="width: 50px;" type="text"/></p> <p style="font-size: small;">(print in full)</p>
<p>-----Your credit card number and CVV number will be securely destroyed once payment is taken.-----</p>	
<p>Card number: <input style="width: 20px;" type="text"/><input style="width: 20px;" type="text"/><input style="width: 20px;" type="text"/><input style="width: 20px;" type="text"/> <input style="width: 20px;" type="text"/><input style="width: 20px;" type="text"/><input style="width: 20px;" type="text"/><input style="width: 20px;" type="text"/> <input style="width: 20px;" type="text"/><input style="width: 20px;" type="text"/><input style="width: 20px;" type="text"/><input style="width: 20px;" type="text"/>      CVV: <input style="width: 20px;" type="text"/><input style="width: 20px;" type="text"/><input style="width: 20px;" type="text"/></p>	



# Nationally Coordinated Criminal History Check Application and Informed Consent Form

OFFICE USE ONLY      Application Type:       Registration No.

Section 7:        OCHC required:        OCHC cleared:        Cleared by:

## Section A – Personal information

### A1. Please read this before answering the following questions.

You must disclose all names you have been known by throughout your life, including your primary name, name before marriage (maiden name), and other previous names and/or alias names.

With each additional name you provide, you must include your family name, first given name and other given names (if applicable).

*Example:*

When Lucianne was born, she was given the first name Lucianne, second given name Jane and surname of Jones. When she was married, she changed her surname to Smith.

Lucianne commonly uses the name Lucy when introducing herself in the community. As such, Lucianne has four known names—her current name, pre-marriage name, the alias name she used before she got married and the alias name she uses now. Lucianne needs to provide all four names when completing this form, as follows:

<b>Current name:</b>	Smith, Lucianne Jane
<b>Pre-marriage name:</b>	Jones, Lucianne Jane
<b>Alias name:</b>	Smith, Lucy Jane
<b>Alias name:</b>	Jones, Lucy Jane

#### Primary name

Family/Surname	First given name
	Other given name(s)

#### Previous/Other known name (if applicable):

Family/Surname	First given name
Name type: Maiden <input type="checkbox"/> Alias <input type="checkbox"/> Previous <input type="checkbox"/>	Other given name(s)
Family/Surname	First given name
Name type: Maiden <input type="checkbox"/> Alias <input type="checkbox"/> Previous <input type="checkbox"/>	Other given name(s)
Family/Surname	First given name
Name type: Maiden <input type="checkbox"/> Alias <input type="checkbox"/> Previous <input type="checkbox"/>	Other given name(s)
Family/Surname	First given name
Name type: Maiden <input type="checkbox"/> Alias <input type="checkbox"/> Previous <input type="checkbox"/>	Other given name(s)



If more room is required, please list on a separate sheet, sign and attach to this form.

**Additional sheet attached?**    Yes     No

### A2. Please read this before answering the following questions.

You must select the gender that best describes how you identify yourself within the community. The ACIC's processes are aligned with the Australian Government *Guidelines on the Recognition of Sex and Gender*. For more information, contact the ACIC directly on 02 6268 7900 or [npcs@acic.gov.au](mailto:npcs@acic.gov.au).

Your Gender:    M  (Male)      F  (Female)      X  (Indeterminate/intersex/unspecified)

Nationally Coordinated Criminal History Check | Application And Informed Consent Form  
**A3. Please read this before answering the following questions.**

If you cannot provide all these details, contact the TRB.

Your Date of Birth:

Your Place of Birth:







Day

Month

Year

Town/Suburb

State

Country

**A4. Please read this before answering the following questions.**

Please provide your current and previous residential addresses for the past five years.

If you cannot provide full details, provide as much information as possible. If you are unsure how to complete this section contact the TRB.

**Current Residential Address** (Street address, Suburb/town, State/territory, Postcode, Country)

Dates residing at address:


From:        /        /

**Previous Residential Address 1** (Street address, Suburb/town, State/territory, Postcode, Country)

Dates residing at address:


From:        /        /

To:         /        /

**Previous Residential Address 2** (Street address, Suburb/town, State/territory, Postcode, Country)

Dates residing at address:


From:        /        /

To:         /        /

**Previous Residential Address 3** (Street address, Suburb/town, State/territory, Postcode, Country)

Dates residing at address:


From:        /        /

To:         /        /



If more room is required, please list on a separate sheet, sign and attach to this form.

**Additional sheet attached?**

Yes

No

**A5. Please read this before answering the following questions.**

If you have an Australian driver's licence and/or an Australian firearms licence, you must provide the licence number and the state or territory that issued your licence.

If you have a foreign driver's licence and/or a firearms licence you must provide the licence number and the country that issued your licence.

If you have a passport, you must provide the passport number and the country that issued your passport.

Passport:  
(if applicable)

Number

Issued by (country)

Driver's Licence:  
(if applicable)

Number

Issued by (state/territory)

Firearms licence:  
(if applicable)

Number

Issued by (state/territory)

OFFICE USE ONLY

Batch No:

Cleared by:

Date:

Comment:



## Section B – Purpose of the Nationally Coordinated Criminal History Check

The Nationally Coordinated Criminal History Check is being conducted for the purpose of granting a Special Authority For An Unregistered Person To Teach as an Exchange Teacher. This involves unsupervised contact with children and young people.

## Section C – Informed consent

### What is informed consent?

Your informed consent is needed before an accredited body can request a Nationally Coordinated Criminal History Check on you. Your informed consent means you:

- have read and understood the information provided in this form about how your personal information and any police information relevant to you will be handled and disclosed
- provide your permission for the accredited body to request a Nationally Coordinated Criminal History Check on your behalf.

### How do I provide my informed consent?

An important aspect of providing informed consent is that you understand what you are consenting to. It is important that you read the consent statements in question C2 and, where required, get clarification from the TRB, to ensure complete understanding. You must then sign and date this form at C2, to give your informed consent.

### C1. Your personal and police information will be disclosed to the Teachers Registration Board of South Australia

### C2. Please read this before answering the following question.

You must provide your name, read each statement carefully and then print your name, sign and date to provide your informed consent.

#### Applicant's consent to submit a Nationally Coordinated Criminal History Check

I, \_\_\_\_\_  
First given name Other given name(s) Surname

1. acknowledge that I understand the information on this form
2. acknowledge that the accredited body Teachers Registration Board of South Australia is collecting information in this form to provide to the Australian Criminal Intelligence Commission (ACIC) and police agencies, for a Nationally Coordinated Criminal History Check to be conducted for the purpose outlined in Section B of this form
3. have fully and accurately completed this form, and the personal information I have provided relates to me and contains the full name and all names previously used by me
4. acknowledge that withholding and/or providing misleading or false information on this form and in any supplied identity documents is a Commonwealth offence and may lead to prosecution under the *Criminal Code Act 1995* (Cth)
5. acknowledge that personal information that I have provided in this form and on the supplied identity documents may be disclosed to the Teachers Registration Board of South Australia
6. acknowledge that any information sent by mail or electronically, in relation to this form, including identity documents, is sent at my risk and I, the applicant, am aware of the consequences of sending information in these ways
7. acknowledge that I am aware that I am providing consent for a Nationally Coordinated Criminal History Check to be conducted on all personal information provided in this form and provided in supplied identity documents
8. understand and consent to police information relating to me being disclosed in accordance with the purpose identified in section B of this form, applicable legislation and information release policies (including spent convictions legislation described in Australian Government and state or territory legislation)
9. give consent to:
  - a. the ACIC and police agencies using and disclosing my personal information that I, the applicant, have provided in this form and personal information contained in my supplied identity documents to conduct a Nationally Coordinated Criminal History Check
  - b. the ACIC disclosing the police information sourced from the police agencies to other approved bodies and the Teachers Registration Board of South Australia
  - c. the Teachers Registration Board of South Australia using my personal information and police information to assess my suitability for registration as a teacher.
10. acknowledge that it is usual practice for my personal information and police information to be used by police agencies and the ACIC for law enforcement, including the purposes set out in the *Australian Crime Commission Act 2002* (Cth).

Applicant's Signature \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_\_