

## Additional Information

### Introduction

This form requests additional information from new entrants in order for Relationships Australia South Australia to meet our obligations as a child-safe service provider and our responsibility under government funded program contracts.

#### 1. Role You are Potentially Entering:

- Employment Position  Volunteer Position  Student Placement

#### 2. Legal Name (as appears on legal documents e.g. birth certificate, drivers licence)

- Full Name: \_\_\_\_\_

So that we can process a DCSI Clearance or National Police Certificate, can you please confirm which part of your name legal authorities (e.g. bank) would use as your:

- Given Name: \_\_\_\_\_
- Middle Name (if you have one): \_\_\_\_\_
- Family Name: \_\_\_\_\_

#### 3. Preferred Name (if different than your legal name)

- Full Name: \_\_\_\_\_

#### 4. Date of Birth

\_\_\_\_ / \_\_\_\_ / \_\_\_\_  
Day / Month / Year

#### 5. Gender Identification (Optional)

Our risk screening process means we ask for copies of legal documents that may not reflect your gender identity. You may like to share further information, but we do not require it.

- Do you identify as a different gender to what is stated on your legal documents?  
 Yes  No  Prefer not to say
- If yes, which of the following describes you?  
 Female  Male  Another description: \_\_\_\_\_  Prefer not to say
- What are the correct pronouns you would like RASA to use for you (e.g. he, she, they)?  
\_\_\_\_\_

## 6. National Police Certificate

- Are you currently being prosecuted or under investigation for a criminal offence?

Yes  No

If yes, please detail below:

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The following disclosure is required to be completed by applicants in order to be considered. Information you share will not automatically stop your employment or volunteer work, and will be looked at with all of the relevant circumstances. However, any wrong information, falsification, misrepresentation, or incompleteness in this disclosure alone is grounds for disqualification or termination.

The focus of our background checking is identifying factors that may pose a risk to children and/others.

If you have any concerns or queries regarding the questions below, contact the General Manager Human Resources on (08) 8216 5200.

- Do you have or have you ever been:

	Yes	No
Convicted of;	<input type="checkbox"/>	<input type="checkbox"/>
Pleaded guilty to;	<input type="checkbox"/>	<input type="checkbox"/>
Pleaded no contest to;	<input type="checkbox"/>	<input type="checkbox"/>
Admitted to;	<input type="checkbox"/>	<input type="checkbox"/>
Under investigation for;	<input type="checkbox"/>	<input type="checkbox"/>
Had any judgement/order rendered against you for;	<input type="checkbox"/>	<input type="checkbox"/>
Entered into any settlement of an action or claim for;	<input type="checkbox"/>	<input type="checkbox"/>
Had any license, certificate, or employment suspended, revoked, terminated, or adversely affected because of;	<input type="checkbox"/>	<input type="checkbox"/>

- Any of the following:

Offence	Yes	No
Any Felony	<input type="checkbox"/>	<input type="checkbox"/>
Rape or other sexual assault	<input type="checkbox"/>	<input type="checkbox"/>
Drug or alcohol related offenses	<input type="checkbox"/>	<input type="checkbox"/>
Abuse of a minor or child, whether physical or sexual	<input type="checkbox"/>	<input type="checkbox"/>
Incest	<input type="checkbox"/>	<input type="checkbox"/>
Kidnapping, false imprisonment or abduction	<input type="checkbox"/>	<input type="checkbox"/>
Sexual harassment	<input type="checkbox"/>	<input type="checkbox"/>
Sexual exploitation of a minor	<input type="checkbox"/>	<input type="checkbox"/>
Sexual conduct with a minor	<input type="checkbox"/>	<input type="checkbox"/>
Annoying/molesting a child	<input type="checkbox"/>	<input type="checkbox"/>
Lewdness and/or indecent exposure	<input type="checkbox"/>	<input type="checkbox"/>
Lewd and lascivious behaviour	<input type="checkbox"/>	<input type="checkbox"/>
Obscene literature	<input type="checkbox"/>	<input type="checkbox"/>
Assault, battery or other offense involving a minor	<input type="checkbox"/>	<input type="checkbox"/>
Endangerment of a child	<input type="checkbox"/>	<input type="checkbox"/>
Any misdemeanor or other offense involving a minor or to which a minor was a witness	<input type="checkbox"/>	<input type="checkbox"/>
Removal of children from a State or concealing children in violation of a law or court order	<input type="checkbox"/>	<input type="checkbox"/>
Restrictions or limitations on contact on visitation with children or minors	<input type="checkbox"/>	<input type="checkbox"/>

- As a result of your behaviour, have the police ever been called, a criminal charge been laid, or intervention/restraining order been made against you?  Yes  No
- Is there now (or has there ever been ) an intervention/restraining order in place against you or have you ever been convicted of a criminal offence in relation to one?  Yes  No

If you answered 'Yes' to any of the above, please provide further information:

Description	Dates

If there is anything else that may appear on your police clearance, please provide further information:

Description	Dates

## 7. Involvement in Children's Out of Home Care and Children's Care Institutions

To ensure continued community and public confidence in the services provided by RASA, you are required to be aware of any actual, perceived and potential conflicts of interest. This includes the need to:

- Avoid real or apparent conflicts of interest and conduct yourself in your private capacities in a manner that will not reflect seriously and/or adversely on RASA.
- Be open and honest regarding any concerns you might have which may involve a conflict of interest.
- Not use your position to further either your own interests or the interests of friends or relatives.
- Declare any involvement with past or current providers of adoption services and/or providers of institutional or Out of Home Care services.

Conflicts of Interest (actual, perceived and potential) may occur in many forms, for example:

- Conflict with financial interests (e.g. directorships, share holdings, real estate or trusts, gifts, and hospitality).
- Conflict with personal interests (e.g. sporting, social or cultural activities as well as family, sexual, neighbour or other relationships, having been a client of RASA).
- Using information or position (e.g. improperly using RASA information to gain financially).
- Association with providers of institutional or Out of Home Care services (e.g. foster care, respite care, residential care) and providers of adoption services.

**It is important you answer the following questions to declare any actual, perceived or potential conflicts of interest:**

- Do you have any interests such as financial, personal or other employment that may, or may be perceived to, cause a conflict of interest for the position you have applied for?  Yes  No

If yes, please provide details:

- Have you, or anyone you know, been a client with Relationships Australia South Australia?  Yes  No

If yes, please provide details:

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- Will you continue in any other employment, volunteering or other activities if you are successful in joining Relationships Australia South Australia?  Yes  No

If yes, please provide details:

- 
- Have you ever been employed, or volunteered, in a role which involved either directly or indirectly (through supervising or managing employees) working with children in out of home care or in a children focused service (e.g. child care)?  Yes  No

If yes, please list the organisation/s, your position, title, period of work and any other relevant information:

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- At any time during or since your paid or unpaid work, were any complaints made against you in relation to child abuse, sexual abuse or any other serious matter relating to children?  Yes  No

If yes, please provide details:

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- At any time during, or since your paid or unpaid work, did you receive any complaints in relation to an employee or volunteer of the organisation regarding the abuse, or sexual abuse, of a child?  Yes  No

If yes, please provide details:

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Please add any information on how there may be any potential overlap between your past work and the potential clients of the position you have applied for, or any other relevant information:

## 8. Public Profile

- Have you been involved in any matters that were reported on in the public sphere (e.g. newspaper, TV, online) that may positively or negatively impact the reputation of your work at RASA?  Yes  No

If yes, please provide details:

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## 9. Medical Declaration

- Do you have any existing or prior injuries or medical conditions that would affect your ability to do the position you have applied for?  Yes  No

If yes, please provide details including any reasonable adjustments you may require:

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## 10. Referees

Please give the names of three referees who can be contacted in reference to your application. Please select as far as possible, people who are able to speak objectively about your suitability for the position and that you consent to this application being discussed with.

Please note that if, following an interview, you are one of the preferred candidates for the position, you may be asked for permission for us to contact your current supervisor or line manager, if they have not already been included as a nominated referee.

- i) Name: \_\_\_\_\_  
Occupation \_\_\_\_\_  
Address \_\_\_\_\_  
Phone \_\_\_\_\_
- ii) Name: \_\_\_\_\_  
Occupation \_\_\_\_\_  
Address \_\_\_\_\_  
Phone (w) \_\_\_\_\_
- iii) Name: \_\_\_\_\_  
Occupation \_\_\_\_\_  
Address \_\_\_\_\_  
Phone (w) \_\_\_\_\_

**Declaration:**

I declare that statements made by me in this application are true and complete and understand that a false statement or dishonest answer may make me liable for dismissal.

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