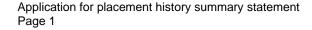
## Application for placement history summary statement

Complete this form to apply for administrative access to a placement history summary statement that sets out the dates and locations of your placements. The information included in your statement might include information about private placements. Placement history summary statements are sourced from the department's electronic holdings and client management systems including dataviewer cards.

Placement history summary statements are only available to the person to whom the information relates or their authorised representative.

**Privacy notice:** The Department of Children, Youth Justice and Multicultural Affairs is collecting your personal information on this form to assess and manage your application for a placement history summary statement. The department will manage your personal information in accordance with the *Information Privacy Act 2009*.

Applicant's details				
First name:		Middle name/s:		
Family name:		Date of birth:		
Other names used while known to the department:				
Dates in care (if known	n):			
Other relevant information:				
E.g. institutions in which you we placed, mother's maiden name names of siblings				
Applicant's authorised representative's details (complete only as relevant)				
First name:		Family name:		
Organisation:				
Address:				
In what capacity are you authorised to act for the applicant?	Support service	<ul><li>☐ Legal representative</li><li>☐ Support service</li><li>☐ Other (please specify):</li></ul>		
If a representative is acting for the applicant, evidence of their authority to act, as well as evidence of their identity, must be forwarded along with this form (identity requirements are the same as for the applicant as detailed overleaf).				





How would you like to receive your placement history summary statement?	☐ Secure email		
	Email address:		
Please select one option only	☐ Registered post		
	Postal address:		
	☐ Collect from Brisbane CBD (111 George Street)		
	☐ Collect from local area office:		
	Please specify which office/ locality:		
How would you like us to	☐ Email		
communicate with you about your request?	Email address:		
Select all that apply	If same as above, write 'as above'		
	☐ Phone		
	Contact number 1:		
	Contact number 2:		
	☐ Mail		
	Postal address:		
	If same as above, write 'a above'	s	
Evidence of identity:	☐ Original certified copy of identity document enclosed		
Contact us on (07) 3097 5605 or freecall 1800 809 078 if you are finding it difficult to provide evidence of your identity	Post a <u>certified</u> copy of your driver's licence, passport, birth certificate, proof of age card or other identity document along with this completed form to:		
	RTI, Privacy, Records Management and Redress Department of Children, Youth Justice and Multicultural Affairs Locked Bag 3405 BRISBANE QLD 4001		
	<u>Certified</u> means certified by a justice of the peace, commissioner for declarations or lawyer as a true copy of the original document. Send the copy which has the original stamp or signature of the person who certified the document		
	☐ Statutory declaration		
	A statutory declaration completed by someone who has known you for two or more years, which says that you are the person named as the applicant.		

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Evidence of identity (cont'd):  Contact us on (07) 3097 5605 or freecall 1800 809 078 if you are finding it difficult to provide evidence of your identity	☐ Evidence of identity sighted by departmental officer		
	Date:		
	Signature:		
	Position title:		
	Region/business area:		
Applicant's signature			
(or signature of authorised representative)			
Date:			