

## Department of Justice and Attorney-General

# **Application to End Suspension**

For use by a suspended cardholder to apply to end the suspension.

#### Who can complete this form?

Suspended cardholders with any of the following disability worker screening card types can use this form to apply to end the suspension:

- NDIS worker screening clearance suspended
- Queensland disability worker screening clearance suspended
- Yellow card positive notice suspended
- Yellow card exemption notice suspended

## Are you eligible to apply to end your suspension?

You are only eligible to make this application if your suspension has been in effect for at least 6 months.

# How to complete this form?

- This form can only be completed by a suspended cardholder to apply to end the suspension
- Please print clearly, use BLOCK letters and indicate with a tick where required
- Delays in processing your application will occur if you do not complete the application correctly

All sections marked with **MUST** be completed or your application can not be processed.

#### How will you use my information?

Your information will be used in accordance with the Disability Worker Screening Privacy Notice and Information Management Policy.

#### What happens next?

Your application to end your suspension will be considered by the Department of Justice and Attorney-General. Your application may not be decided if:

- A charge against you for an offence has not been dealt with; or
- There is an incident involving you, or an allegation or complaint about your conduct relevant to whether you pose a risk of harm to people with disability that is being investigated and the investigation has not ended.

If your application is refused, you will be notified in writing.

You will be contacted if any further information is required from you to assess your application and notice of the outcome will be provided to you.

Identity and personal information						
▲ Legal name:						
Title	First name	Middle name	Last name			
		No middle name (please tick)				
<b>⊿</b> Date	e of birth:	(**************************************				
Mobile number:		▲ Daytime phone number:				
TMR re	gistered email address:					

Residential address:		
Town/ Suburb	State	Postcode
My residential address is the same as my p	ostal address.	
Postal address (if different from residential address	ss):	
Town/ Suburb	State	Postcode
<b>▲</b> Disclosable information		
	ension - are you currently suspended, or have you g with children check, working with vulnerable pec	
people with a disability check (or equivalent) in a		
No Yes – If yes, please provide the fol	lowing if known:	
State refusal was issued:		
Brief description of the type of screening process	: (eg working with children check)	
	_	
	nan disability worker screening check in Queenslan lity, elderly) which has resulted in you currently bei	
work or being issued with an unsuccessful outco		
Have you ever been charged or convicted or found	I guilty of a criminal offence in Australia?	
No Yes - If yes, please provide the foll	owing:	
Brief summary of your criminal history. Where applicates and outcomes of any proceedings:	propriate please include details of the location and	d nature of the charge/conviction, relevant

This question is about whether you have a criminal history in Australia. This includes convictions or charges that occurred before or after the commencement of the *Disability Services Act 2006*. A conviction means a finding of guilt or the acceptance of a plea of guilty by a court whether or not a conviction is recorded.

Have you ever been convicted or found guilty of any of the below,	or equivalent, offences in a country other than Australia?			
<ul> <li>murder, attempted murder, or manslaughter</li> <li>serious or aggravated assault</li> <li>rape, bestiality, sexual assault, or incest</li> <li>aggravated robbery</li> <li>child pornography offences</li> <li>abduction, kidnapping, human trafficking, or slavery</li> <li>No Yes - If yes, please provide the following:</li> </ul> Brief summary of your international criminal history. Where approprice conviction, relevant dates and outcomes of any proceedings:	<ul> <li>drug trafficking and drug dealing</li> <li>neglect or ill-treatment of a child or vulnerable person</li> <li>fraud, deception, or forgery involving a child or vulnerable person</li> <li>treason/treachery, terrorism, genocide, mutiny, or espionage</li> <li>animal cruelty causing an animal serious injury, harm, or death</li> </ul>			
conviction, relevant dates and outcomes of any proceedings.				
This question is about whether you have been found guilty of any of t	he specified offences, or similar offences, outside of Australia.			
Have you ever been a respondent to a domestic violence order in Qu	eensland?			
No Yes – If yes, please provide the following:				
Brief summary of the orders. Where appropriate please include details of relevant dates:				
This question is about protection orders, including temporary prot and Family Violence Protection Act 2012.	ection orders, issued against you in Queensland under the <i>Domestic</i>			
	agency anywhere in Australia that involved allegations of abuse or g your contact with that child or other children (including the removal			
No Yes – If yes, please provide the following:				
ivo ies ii yes, piease piovide the following.				
Brief summary of the orders. Where appropriate please include deta	ils of relevant dates:			
	ils of relevant dates:			
	ils of relevant dates:			

•	ny workplace misconduct findings against you, or are you subject to a current investigation, in relation to:
violent behaviour	
<ul><li>Indecent or sexual</li><li>fraud, deception</li></ul>	al behaviour or misconduct
•	care for a vulnerable person such as a child, elderly person or person with disability
	- If yes, please provide the following:
Brief summary of the	e findings. Where appropriate please include details of the nature of the findings, relevant dates and outcomes.
4 4 1 124	
▲ Additional I	nformation to support your application
	unity to attach supporting documentation to this application. You may state anything you consider relevant to the decision on the shape of the options below.
Lhaus attachas	
I nave attached	d supporting documentation to this application
I have NOT atta	ached supporting documentation to this application
Declaration	S .
I have read and	understand the contents of this form
The information	provided by me on this form and in any supporting documentation I attach is true and correct and I understand it is an
	de false or misleading information
Signature	Date of signature
Next steps	
Please return your	completed form by one of the following methods:
By post:	Disability Worker Screening Unit
	Department of Justice and Attorney-General
	PO Box 10179, Brisbane Adelaide Street QLD 4001
Scan and email:	contactus@workerscreening.qld.gov.au

# Department of Justice and Attorney-General

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\$ 1800 183 690