



Direct Registration Form

Disability Employment Services

Privacy and Your Personal Information

Personal information collected by the Department of Education, Employment and Workplace Relations (DEEWR) on this form is protected by the *Privacy Act 1988* (Privacy Act). The authority to collect this information is contained in social security law. Your personal information can only be disclosed by DEEWR and its contracted service providers in accordance with the Privacy Act.

DEEWR may give some or all of the information you provide to: the Department of Human Services; the Department of Families, Housing, Community Services and Indigenous Affairs; the Department of Immigration and Citizenship; Centrelink; and DEEWR Program Providers. These agencies use this information to administer, monitor and evaluate their programs and contracted providers.

The information you provide on this form will be used to:

- determine your eligibility for participation in Disability Employment Services (DES) which is delivered by DEEWR contracted Program Providers (DES providers);
- provide you with employment and training opportunities;
- evaluate and monitor outcomes, programs and services provided by DES providers;
- facilitate resolution of complaints made by you or your DES provider; and
- allow for inclusion of your name in surveys conducted by DEEWR or on behalf of DEEWR.

As part of the eligibility process you might be referred to a Job Capacity Assessment (JCA)

provider. The information collected in the JCA may be used by DEEWR contracted service providers, including Salmat Call Centre operators, who may need access to your personal information to reissue you a password for your personal page on Job Search.

DEEWR can give your personal information to other persons, bodies or agencies without your permission in circumstances where Commonwealth legislation requires or authorises the disclosure. If you have concerns about the way in which your personal information is being managed by DEEWR and other departments or agencies, you should discuss these concerns with your DES provider, the department or agency concerned or with the Federal Privacy Commissioner, who can be contacted at www.privacy.gov.au.

1 Job seeker identification details

Are you already registered as looking for work with:

- Centrelink;
- A Australian Disability Enterprise provider;
- A Job Services Australia (JSA) provider; or
- DES provider?

Yes No

If **yes**, please provide your Job Seeker Identification Number:

And / or your Centrelink Customer Reference Number (this information can be found on any letter to you from Centrelink or your Centrelink Health Care Card / Centrelink Concession Card):

2 Your personal details

Title

Family name

First name(s)

Preferred name

Date of birth

Age

Gender

Male Female

Country of birth

Is English your first language?

Yes No

Do you require access to an interpreter?

Yes No

3 Are you an Australian resident?

An Australian resident is a person who resides in Australia and is one of the following:

- An Australian citizen;
- The holder of a permanent resident visa; or
- A special category visa holder (SCV) who is a protected SCV holder.

No Yes

4 Do you have a disability, injury or health condition?

No Yes

Note: if you do not have a disability, injury or health condition you will not be eligible for specialist assistance with a Disability Employment Services Program provider.

5 Do you identify yourself as an Indigenous Australian of Aboriginal and/or Torres Islander descent?

No Yes

Note: You do not have to answer this question. This information is sought to assess the level of services provided to Indigenous Australians by Disability Employment Services Program providers and this information will not be disclosed to Employers without your consent.

6 Are you or have you been known by any other names?

For example, a maiden name, previous married name, Indigenous or Community name.

Yes No

Previous name(s)

7 Your contact details

Postal Address

Number and street / PO Box

Suburb or town

State or Territory

Post code

Residential Address (if different from above)

Number and street

Suburb or town

State or Territory

Post code

Other contact details

Home telephone number

Work telephone number

Mobile telephone number

Fax number

Email address

8 Your preferred method of contact

Phone

SMS

Email

Post

9 Income Support

Do you receive an allowance from Centrelink?

Yes

No

If **yes**, please provide the name of the allowance.

(Your provider will need to verify the type of allowance with Centrelink)

If **no**, go to 10.

10 Personal Circumstances

a. Are you participating in a Community Development Employment Project (CDEP)?

Yes

No

If **yes**, what date did you start?*

Please specify the name of the Community Development Employment Project

* DES providers should contact the CDEP Provider to confirm the most recent date of a job seeker's commencement in CDEP. If the job seeker is a continuing CDEP participant receiving CDEP wages, they are eligible to Directly Register.

b. Are you currently doing any paid work?

Yes

No

If **yes**, please indicate the number of hours worked per week:

c. Are you in full-time education or training?

Yes

No

d. Have you been made redundant in the last 6 months**?

**Please provide written proof of redundancy, such as a letter from your employer or an Employment Separation Certificate which includes the date of redundancy.

Yes

No

If **yes**,

Have you been made redundant from the automotive manufacturing or Textile, Clothing and Footwear industries***?

*** confirmation must be sought from DEEWR for company eligibility.

Yes

No

If **yes**,

please indicate the name of the organisation from which you were made redundant:

or,

Have you been made redundant from Mitsubishi, Bluescope Steel, Electrolux or Coles/Myer?

No

Yes

If **yes**,

please indicate the name of the organisation from which you were made redundant:

11 Job in Jeopardy

Is your employment in jeopardy as a result of your disability, injury or health condition?

Yes

No

If **yes**, please provide evidence and enter:

Your employer's business name

Name of Contact Person at your place of employment (optional)

12 Eligible School Leaver

Are you in full time secondary school and looking at post school employment options, part time after school work or a School based Apprenticeship?

Yes No

If **yes**, please provide the name of the school you are attending:

12 Participating in Australian Disability Enterprise (ADE)

Are you registered with an Australian Disability Enterprise provider?

Yes No

If **yes**, please provide:

Name of ADE provider

Number of hours per week that you work

Note: If you have answered yes to this question, you may be referred to a JCA provider if you wish to transition into Disability Employment Services

12 Proof of identity

You must be able to provide documentation specified in either **Group A or Group B**.

Group A – Documents should be shown to your DES provider .

You must provide **one** of the following:

- Driver's licence number

- Current Australian Passport number:

- Other form of photo identification from a government department or agency.

Please specify type of identification.

Please specify identification number.

Group B – You must provide **two** of the following:

- **Financial institution (bank) documents#**

Including ATM or credit cards showing your name and signature or account statement showing your name and address or current passbook showing your name.

#Identification or account numbers are not copied or recorded.

- **Or other documents** – any of the following documents,:

- ~ Birth Certificate or Birth Certificate Extract
- ~ Certificate of Australian Citizenship
- ~ Motor vehicle registration papers with current address
- ~ Australian Marriage Certificate
- ~ Documents showing registration of a change of name
- ~ Divorce papers
- ~ Trade Certificate
- ~ Insurance Renewal documents showing current address
- ~ Medicare Card
- ~ Other (please specify)

Declaration by job seeker:

By signing below, I confirm that:

- I have read and understood the completed form, and the information included therein is complete and true to the best of my knowledge.
- I have read, understood and agree to the use and disclosure of my personal information in accordance with the Privacy Statement at the front of this form.
- I am not currently participating in any other Australian Government employment program (such as Job Services Australia).
- I understand that if I am in receipt of Disability Support Pension (DSP) and volunteering for employment assistance, I will need a 'pre-employment referral' Job Capacity Assessment to ensure I am referred to the most appropriate service and to determine suitable participation levels in that service. This will not affect my eligibility for DSP.
- If I am a pre-release prisoner I have been referred to a DES provider by a State or Territory correctional service officer.
- I have been fully informed about DES, including its purpose and examples of activities in which I may be expected to participate in.
- I understand that my records may be transferred to a new provider in the event that my DES provider cannot provide services to me for any reason, including a change of address.
- I understand the *Service Guarantee* and the *Employment Services Code of Practice* as it was explained to me by my DES provider.

(Where applicable) Additional declaration by legal guardian/administrator of job seeker *:

- I have been appointed the legal guardian/administrator of the job seeker and as such, I am authorised to sign this declaration for, and on behalf of, the job seeker (please tick box).

Yes

Signed: _____ Date: _____

Printed Name: _____

* NOTE: where the job seeker has been appointed a guardian or administrator, the guardian or administrator should sign the declaration.

Declaration by DES provider:

By signing below, I declare that:

- I have discussed with the job seeker the level and type of DES Program Services available and the required eligibility to participate.
- I have encouraged the job seeker to provide as much relevant information as possible during the registration process, so that they can receive the help that best meets their needs.
- The information about the job seeker, as entered on this form and in DEEWR's IT systems, is true and correct to the best of my knowledge.
- I have sighted documents establishing the job seekers Proof of Identity.
- I have discussed the *Service Guarantee* and the *Employment Services Code of Practice* with the job seeker, and have made them aware of their rights and the obligations of the DES provider outlined in these documents.
- I have fully informed the job seeker about DES, including its purpose and examples of typical activities in which they may be expected to participate.
- For Indigenous job seekers, I have checked the job seeker's eligibility for the Indigenous Wage Assistance Program, and if they are eligible informed them about the benefits of the program. I will record in DEEWR's IT Systems that I have informed the job seeker of these benefits.

Signed: _____ Date: _____

Printed Name: _____