



# Catholic Archdiocese of Perth

## Safeguarding Personal Declaration

\*\*\*\* Confidential \*\*\*\*

Church worker	<input type="checkbox"/> Clergy/Religious	<input type="checkbox"/> Seminarian	<input type="checkbox"/> Paid	<input type="checkbox"/> Unpaid
Role/s				
Surname		First name/s		
Name previously known by		Date of birth	/ /	
Address				
Email				
Mobile Number		Phone Number		
Diocese/Religious Institute/Parish/Agency/Office Name				
WA Working with Children Card No (if applicable)		Expiry Date		
Other than the Parent or Child Volunteer Exemption, have you been denied a WA WWCC Card?			<input type="checkbox"/> Yes <input type="checkbox"/> No	
National Police Clearance No (if applicable)		Issue Date		
ACMR Australian Catholic Ministry Register ID (if applicable)				
Please mark those statements that you are currently able to affirm unconditionally				
<input type="radio"/> There are not currently any complaints of abuse against me				
<input type="radio"/> I am not subject to any past substantiated complaint of abuse.				
<input type="radio"/> There are no circumstances that could lead to a complaint of abuse against me.				
<input type="radio"/> There are no other circumstances past or present that may lead to a conclusion that I pose a risk to children, young people or adults at risk.				
<input type="radio"/> <a href="#">I have read, understood, and will comply with the Catholic Archdiocese of Perth Code of Conduct</a>				
If you are unable to affirm any of these statements, please provide further details below and any relevant documentation.				
VISITING CLERGY, RELIGIOUS & LAITY USE ONLY (if applicable):				
Visitation Dates	From:	/ /	To:	/ /
Purpose of Visit				
Visitation Location/Address				
Non-WA WWCC No.		Expiry Date		
Declaration				
The information provided is correct. I understand that, if it is found I have withheld information or included any false or misleading information, I may be removed from my position without notice. I understand that I may be subject to further checks. This information will be kept securely at the CAPAC, parish/agency, or Safeguarding Office.				
Sign		Date		
Name				

CLERGY/RELIGIOUS RETURN THIS FORM TO THE OFFICE OF THE VICAR GENERAL AND RETAIN A COPY.

CHURCH WORKERS (PAID AND UNPAID) RETURN THIS FORM TO THE PARISH/AGENCY/OFFICE.

SAFEGUARDING OFFICERS RETURN THIS FORM TO THE SAFEGUARDING OFFICE AND RETAIN A COPY.

Safeguarding Office: (08) 9221 7762

Email: [safeguarding@perthcatholic.org.au](mailto:safeguarding@perthcatholic.org.au)

Office of the Vicar General: (08) 6104 3600

Email: [ea.vg@perthcatholic.org.au](mailto:ea.vg@perthcatholic.org.au)