

Please send completed forms to: ministry@sydneycatholic.org Chancery: (02) 9390 5174



A safe Church for everyone

Individual Safeguarding Declaration and Disclosure

APPLICATION DETAILS	
Applicant's name	
Applicant's Church entity (Diocese or Religious In	stitute)
Travel dates	
APPLICANT'S DECLARATION	
Please mark those statements that you are curre	ntly able to affirm unconditionally.
There are not currently any complaints of	abuse against me.
I am not subject to any past substantiated	d complaint of abuse.
There are no circumstances that could lea	ad to a complaint of abuse against me.
There are no other circumstances that machildren, young people or adults at risk.	ay lead to a conclusion that I pose a risk to
APPLICANT'S DISCLOSURE	
Please briefly explain why you are presently unable to affirm one or more of these statements and provide any other relevant information or comment. Further detail and relevant documentation from you and your Church Authority may be attached along with this form.	
I understand that the receiving Church Authority will use this declaration and disclosure, along with the statement of my Church Authority, as the beginning point for assessing my suitability for temporary faculties. I will assist with any further enquiries and risk assessments as well as legal and other background checks/screening requirements prior to a grant of short term faculties being made.	
Signature of Applicant	Date:

Church Authority Safeguarding Statement and Disclosure

APPLICATION DETAILS Applicant's name Applicant's Church entity (Diocese or Religious Institute) Travel dates **CHURCH AUTHORITY'S STATEMENT** Please mark those statements that you are currently able to affirm unconditionally, to the best of your knowledge and having made appropriate enquiries. There are not currently any complaints of abuse against the applicant. The applicant is not subject to any past substantiated complaint of abuse. There are no circumstances that could lead to a complaint of abuse against the applicant. The applicant does not pose an elevated risk toward children, young people or adults at risk. **CHURCH AUTHORITY'S DISCLOSURE** Please briefly explain why you are presently unable to affirm one or more of these statements and provide any other relevant information or comment. Further detail and relevant documentation from you and the applicant may be attached along with this form. I understand that the receiving Church Authority will use this statement and disclosure, along with the statement of my Church Authority, as the beginning point for assessing the applicant's suitability for temporary faculties. I will assist with any further enquiries and risk assessments as appropriate. Church Authority's full name and title Date: Signature of Church Authority