

ICHC-00



International criminal history check form

Section 131 of the Health Practitioner Regulation National Law (the National Law)

This form is to identify if an applicant has criminal history in Australia or overseas. This form is for applicants seeking new or additional registration as a health practitioner (including re-entry to practice and fast-track applicants) and for health practitioners registered under the Trans Tasman Mutual Recognition Act 1997.

If required, the applicant will need to apply for an international criminal history check from an Australian Health Practitioner Regulation Agency (Ahpra) approved supplier. This supplier will provide the international criminal history check report to the applicant or registered practitioner, and directly to Ahpra.

For more information about criminal history checks, refer to www.ahpra.gov. au/Registration/Registration-Process/Criminal-history-checks.

Symbols in this form

Additional information

Provides specific information about a question or section of the form.

Signature required

Attach document(s) to this form

Requests appropriate parties to sign the form where indicated.

Processing cannot occur until all required documents are received.

Completing this form

- Read and complete all questions. •
- Ensure that **all pages** and required **attachments** are returned to Ahpra.
- Use a black or blue pen only.
- Print clearly in BLOCK LETTERS
- Place X in all applicable boxes:
- DO NOT send original documents unless specified.

Privacy and confidentiality

The Board and Ahpra are committed to protecting your personal information in accordance with the Privacy Act 1988 (Cth). The ways the Board and Ahpra may collect, use and disclose your information are set out in the collection statement relevant to this application, available at

www.ahpra.gov.au/privacy.

By signing this form, you confirm that you have read the collection statement. Ahpra's privacy policy explains how you may access and seek correction of your personal information held by Ahpra and the Board, how to complain to Ahpra about a breach of your privacy and how your complaint will be dealt with. This policy can be accessed at www.ahpra.gov.au/privacy



Do not use staples or glue, or affix sticky notes to your application. Please ensure all supporting documents are on A4 size paper.

SECTION A: Personal details

1. What is your name and date of birth?



You must provide evidence of a change of name if you have ever been formally known by another name(s) or any of the documentation you are providing in support of your application is in another name(s).

> Evidence must be a certified copy of one of the following documents:

- Standard marriage certificate (ceremonial certificates will not be accepted).
- Deed poll. •
- Change of name certificate.

Faxed, scanned or emailed copies of certified documents will not be accepted.

2. What are your profession details?

Title* MR 🔀	MRS 🔀	MISS	\times	MS 🔀	D	r 🖂		OTH	ER	SPE	CIFY]		
Family na	ne*											_		
First given	name*													
Middle na	me(s)*													
Previous n	Previous names known by (e.g. maiden name)													
Date of bir	th D D] / M	Μ	/ <u>Y</u>	YY	Y								
If you have ever been formally known by another name, or you are providing documents in another name, you must attach proof of your name change unless this has been previously provided to the Board.														
Profession														

Registration number (if you have one)

Effective from: 20 November 2019

SECTION B: Criminal history



- **Criminal history** includes the following, whether in Australia or overseas, at any time:
- every conviction of a person for an offence
- every plea of guilty or finding of guilt by a court of the person for an offence, whether or not a conviction is recorded for the offence, and
- every charge made against the person for an offence. •

Under the National Law, spent convictions legislation does not apply to criminal history disclosure requirements. Therefore, you must disclose your complete criminal history as detailed above, irrespective of the time that has lapsed since the charge was laid or the finding of guilt was made.

The National Board will decide whether a health practitioner's criminal history is relevant to the practice of the profession.

You are not required to obtain or provide your Australian criminal history report, Ahpra will obtain this check on your behalf. You may be required to obtain international criminal history reports. For more information, view the registration standard online at www.ahpra.gov.au.

NO

3. Do you have any criminal history in Australia?

It is important that you have a clear understanding of the definition of criminal history. For more information, refer to www.ahpra.gov.au/Registration/Registration-Standards/Criminal-history.



YFS

You **must** attach a signed and dated written statement with details of your criminal history in

4. Do you have any criminal history in one or more countries other than Australia?

If you answer Yes to this question, you are required to obtain an international criminal history check (ICHC) from an approved vendor, who will provide a check reference number and ICHC reference page.

For a list of approved vendors and further information about international criminal history checks, refer to www.ahpra.gov.au/ internationalcriminalhistory

5. Are there any countries other than Australia in which you have lived, or been primarily based, for six consecutive months or longer, when aged 18 years or more?

> If you answer Yes to this question, you are required to obtain an international criminal history check (ICHC) from an approved vendor, who will provide a check reference number and ICHC reference page. For a list of approved vendors and further information about international criminal history checks, refer to www.ahpra.gov.au/ internationalcriminalhistory



You are required to:

Go to the next question

- obtain an international criminal history check from an approved vendor for each country and provide details below, and
- provide details of your criminal history in a signed and dated written statement.

Country	Check reference number				
You must attach a separate sheet if the list of overseas countries and corresponding check reference number does not fit in the space provided.					
You must attach the international criminal history check (ICHC) r the approved vendor.	eference page provided by				
You must attach a signed and dated written statement with deta each of the countries listed and an explanation of the circumstar					

Go to the Section C

NO

YES

You are required to obtain an international criminal history check from an approved vendor for each country and provide details below

Country		Check reference number
	You must attach a separate sheet if the list of overseas countries reference number does not fit in the space provided.	and corresponding check
Ø	You must attach the international criminal history check (ICHC) re the approved vendor.	eference page provided by

SECTION C: Declaration

Consent to nationally coordinated criminal history check

I authorise Ahpra and the National Board to carry out a nationally coordinated criminal history check for the purpose of assessing this application, if required. I acknowledge that:

- a complete criminal history, including resolved and unresolved charges, spent convictions, and findings of guilt for which no conviction was recorded, will be released to Ahpra and the National Board,
- my personal information will be extracted from this form and provided to the Australian Criminal Intelligence Commission (ACIC) and Australian police agencies for the purpose of conducting a nationally coordinated criminal history check, including all names under which I am or have been known
- my personal information may be used by police for general law enforcement purposes, including those purposes set out in the Australian Crime Commission Act 2002 (Cth),
- my identity information provided with this application will be enrolled with Ahpra to allow for any subsequent criminal history checks during my period of registration
- if and when registration is granted, Ahpra may check my criminal history at any time during my period of registration as required by the National Board for the purpose of assessing my suitability to hold health practitioner registration; or in response to a Notice of Certain Events; or an application for Removal of Reprimand from the National Register,
- I may dispute the result of the nationally coordinated criminal history check by contacting Ahpra in the first instance.

Consent

I consent to Ahpra and the National Board making enquiries of, and exchanging information with, the authorities of any Australian state or territory, or other country, regarding my practice as a health practitioner or otherwise regarding matters relevant to this application. I acknowledge that:

- The National Board may validate documents provided in support of this application as evidence of my identity, and
- failure to complete all relevant sections of this application and to enclose all supporting documentation may result in this application not being accepted.
- notices required under the National Law and other correspondence relating to my application and registration (if granted) will be sent electronically to me via my nominated email address
- Ahpra uses overseas cloud service providers to hold, process and maintain personal information where this is reasonably necessary to enable Ahpra to
 perform its functions under the National Law. These providers include Salesforce, whose operations are located in Japan and the United States of America.

I undertake to comply with all relevant legislation and National Board registration standards, codes and guidelines.

I understand that personal information that I provide may be given to a third party for regulatory purposes, as authorised or required by the National Law. I confirm that I have read the privacy and confidentiality statement for this form.

I declare that:

- the above statements, and the documents provided in support of this application, are true and correct, and
- I am the person named in this application and in the attached documents provided.

I make this declaration in the knowledge that a false statement is grounds for the National Board to refuse registration.

Signature of applicant	Name of applicant
SIGN HERE	Date

SECTION D: Checklist

Additional documentation	Attached
A signed and dated written statement with details of your criminal history in Australia and an explanation of the circumstances	\times
A signed and dated written statement with details of your criminal history in each of the countries listed and an explanation of the circumstances	\mathbf{X}
A separate sheet of overseas countries and corresponding check reference number	\times
ICHC reference page provided by the approved vendor	\mathbf{X}

Please post this form with required attachments to:	Ahpra GPO Box 9958 IN YOUR CAPITAL	CITY (refer below)	You may contact Ahpra on 1300 419 495 or you can lodge an enquiry at www.ahpra.gov.au				
	Sydney NSW 2001	Canberra ACT 2601	Melbourne VIC 3001	Brisbane QLD 4001			
	Adelaide SA 5001	Perth WA 6001	Hobart TAS 7001	Darwin NT 0801			