NEW SOUTH WALES

**STATUTORY DECLARATION**

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| A person who intentionally makes a false statement in a statutory declaration is guilty of an offence, the punishment for which is a term of up to 7 years under sections 25 and 25A of the *Oaths Act* 1900 (NSW) and Chapter 5 of the *Criminal Procedure Act* 1986 (NSW). |

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ in the State of New South Wales, Australia, do solemnly and sincerely declare under the *Oaths Act* 1900 (NSW) that:

1. I am an applicant for registration with the \*\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_   
   Board of Australia (the Board) under the *Health Practitioner Regulation National Law Act* 2009 (NSW).

*\*Insert Aboriginal and Torres Strait Islander Health Practice, Chinese Medicine, Chiropractic, Dental, Medical, Medical Radiation Practice, Nursing and Midwifery, Occupational Therapy, Optometry, Osteopathy, Pharmacy, Physiotherapy, Podiatry, or Psychology.*

1. I obtained a \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ *(insert Certificate of Registration Status or Certificate of Good Standing)* from   
   \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ *(name of regulatory body)*   
   confirming my registration status and good standing in the profession for the purposes of the application referred to in point 1.
2. Since I submitted my application for registration referred to in point 1, my registration referred to in the above certificate has not been:
   1. suspended or cancelled
   2. refused, or

subject to conditions or any other disciplinary action.

1. I am not currently the subject of conduct, performance or health proceedings relating to my registration referred to in the above certificate.
2. I am not aware of any other fact or circumstance that would detrimentally affect my eligibility for registration by the Board.
3. I understand the provision of false and/or misleading information may constitute behaviour or conduct for which action may be taken against me and which may result in the suspension or cancellation of my registration in the event I have been granted registration.
4. I am further aware that a person who knowingly makes a false statement in a statutory declaration is guilty of an offence under sections 25 and 25A of the Oaths Act 1900 (NSW) and Chapter 5 of the Criminal Procedure Act 1986 (NSW).

**PLEASE READ AND MAKE SURE YOU UNDERSTAND THIS STATEMENT BEFORE SIGNING:**

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| I understand that a person who intentionally makes a false statement in a statutory declaration is guilty of an offence under sections 25 and 25A of the *Oaths Act* 1900 (NSW) and Chapter 5 of the *Criminal Procedure Act* 1986 (NSW ). |

1. I make this solemn declaration conscientiously believing the same to be true, and by virtue of the provisions of the under the *Oaths Act* 1900 (NSW).

Declared by \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ *(applicant name)*

at \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (place)

on \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ *(date)*.

Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

In the presence of an authorised witness who states:

\**Please cross out any text that does not apply*

I \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(*insert authorised witness name)*,

a \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(*insert qualification to be authorised witness)*,

certify the following matters concerning the making of this \*statutory declaration/affidavit by the person who made it:

1  \*I saw the face of the person *or* \*I did not see the face of the person because the person was wearing a face covering, but I am satisfied that the person had a special justification for not removing the covering.

2  \*I have known the person for at least 12 months *or* \*I have confirmed the person’s identity using an identification document and the document I relied on was\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ [*describe identification document relied on*].

*\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*

*signature of authorised witness*

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**NOTE:**

Without limitation, statutory declarations may be made before a person who is enrolled on the roll of the Supreme Court of a State or Territory, or the High Court of Australia, as a legal practitioner (however described).