



## Individual Safeguarding Declaration and Disclosure

(For use when a person who has disclosures to be made applies for permission to minister in another Church Jurisdiction, and has no ACMR#)

**To: Archbishop Patrick O'Regan  
Archbishop of Adelaide  
Email: caasava@adelaide.catholic.org.au**

### APPLICATION DETAILS

Applicant's name:

### APPLICANT'S DECLARATION

Please mark those statements that you are currently able to affirm unconditionally.

- There are not currently any complaints of abuse against me.
- I am not subject to any past substantiated complaint of abuse.
- There are no circumstances that could lead to a complaint of abuse against me.
- There are no other circumstances that may lead to a conclusion that I pose a risk to children, young people or adults at risk.

### 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 use of 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. I am also aware that in the event that I am granted short term permission, I am required to work in accordance with all jurisdictional policies and standards and meet all legislative requirements particularly relating to working with children and adults at risk.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date (dd/mm/yy)



**Church Authority Safeguarding  
Statement and Disclosure**

**To: Archbishop Patrick O'Regan  
Archbishop of Adelaide  
Email: caasava@adelaide.catholic.org.au**

**APPLICATION DETAILS**

Applicant's name:

**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:

\_\_\_\_\_  
Signature of Church Authority

\_\_\_\_\_  
Date (dd/mm/yy)