Finally, the Victim Liaison Service provides a critical link between victims of crime, their families and the prosecution. If you would like to help us improve this service by providing anonymous feedback via an online survey, please visit the website below and enter the password provided.

Website:

https://www.surveymonkey.com/r/odppvlssurvey

Password:

**ODPPVLS** 

Using this password will not identify you as the respondent. More information about the survey is available in the enclosed factsheet.

If you have any questions or concerns, please do not hesitate to contact me on (07) 5470 8148.

Yours faithfully

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Yours faithfully

If you have any questions or concerns, please do not hesitate to contact me on the below telephone number.

Yours faithfully



**Queensland** Government Wendy Wright
Victim Liaison Officer – Maroochydore
Office of the Director of Public Prosecutions

**P** 07 5470 8148 **Ext** 88148 **F** 5470 8193 **E** <u>wendy.wright@justice.qld.gov.au</u> PO Box 1105, Maroochydore, QLD 4558



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\*

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\*

#### **NOTES**

## (1) If you are no longer acting in the matter:

Please note that practice direction 19 of the *Criminal Practice Rules* 1999 sets out the requirements if a lawyer wants to withdraw from acting for an accused person.

### (2) If other charges are pending:

If your client(s) has other charges pending which you are instructed may proceed by ex officio indictment, please advise this office as soon as possible giving details of the charges and the name and station of the arresting officer in respect of those charges.

### (3) If a plea of guilty is intended:

The *Penalties and Sentences Act 1992* provides that a court may, when imposing a sentence, have regard to the time at which the offender informed the relevant law enforcement agency of his or her intention to plead guilty. If your client(s) intends to plead guilty to the charge(s) in the indictment, please advise this office in writing as soon as possible.

### (4) If you wish to make a submission:

If your client(s) wishes to make a submission regarding reduction or discontinuance of the charge(s) in the indictment, whether before presentation of the indictment or after presentation, please forward the submission in writing to the Manager Operations at this office as soon as possible. Written submissions are preferred.

## (5) If you wish to receive a copy of the depositions or exhibits:

If you wish to receive a copy of the depositions, these are available upon request from the Depositions Officer (phone +61 7 5470 8199).

All physical exhibits can be made available for inspection upon request from the Exhibits Officer (phone +61 7 5470 8199).

It is important to note that it could be some time before this matter is listed for a significant court event. This may involve the matter being mentioned in Court a number of times. We will advise you once a date has been set <u>and</u> if or when you are required to attend Court.

It may be possible for you to access support such as counselling or make an application for financial assistance. For more information contact Victims Assist Queensland on 1300 546 587 or a private solicitor or visit —

https://publications.gld.gov.au/dataset/a-guide-for-victims-of-crime-in-queensland.

If you have any questions or concerns, please do not hesitate to contact me on the above telephone number.

Yours faithfully

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If you have any questions or concerns, please do not hesitate to contact me on the above telephone number.

Yours faithfully

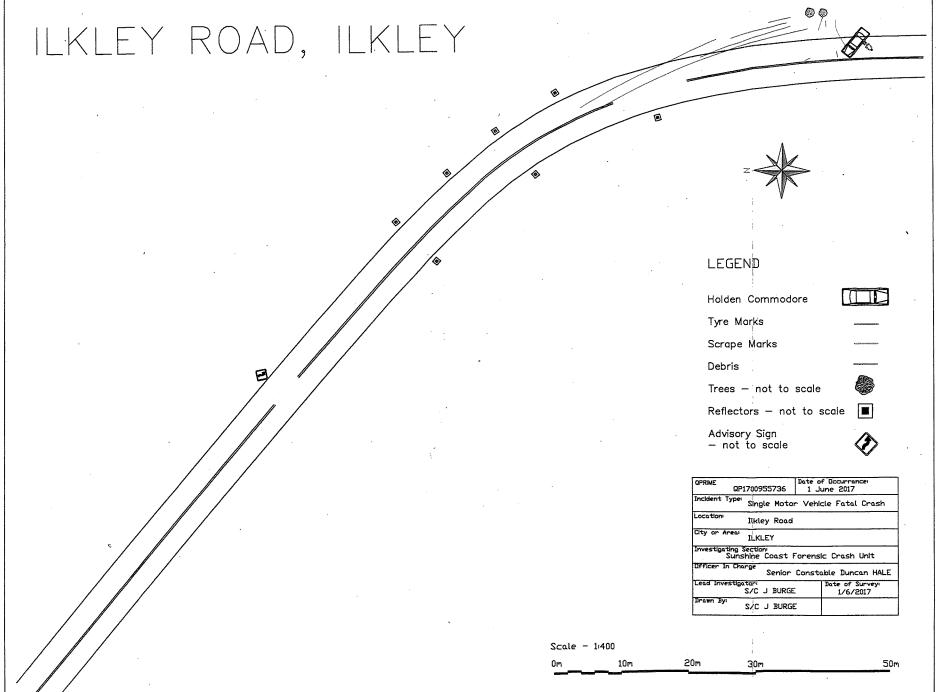




Queensland Government

### Erica Zammit Legal Support Officer – Maroochydore Office of the Director of Public Prosecutions

P 07 5470 8157 Ext 88157 F 5470 8193 E <u>Erica.Zammit@justice.qld.gov.au</u> PO Box 1105, Maroochydore, QLD 4558







## Criminal Practice Rules 1999 (rule 29) Form 23, Version 1 - Notice to be served with form 21 subpoena

#### THIS IS A VERY IMPORTANT DOCUMENT - PLEASE READ IT CAREFULLY

### Failure to comply with subpoena may result in arrest

Failure to comply with this subpoena without lawful excuse is contempt of court and may result in your arrest.

## Not all subpoenas will specify a particular date and time to attend.

The courts often list a number of cases in the same time period. As cases are completed or adjourned others may progress up the list. The lists are constantly reviewed to maximise use of court time and to reduce the costs to the taxpayer. If you have not been given a definite date and time in the subpoena, the party serving the subpoena must, as soon as practicable, advise you when you are required to attend court or if your attendance is no longer required (rule 29 Criminal Practice Rules 1999).

#### **Entitlement to travelling expenses**

A person must comply with a subpoena only if an amount sufficient to meet the person's reasonable travelling expenses in complying with the subpoena, or a ticket or other travel document needed to comply with it, is tendered either when the subpoena is served or within a reasonable time before attendance under the subpoena is required (rule 35 Criminal Practice Rules 1999).

#### Application to set aside subpoena

A person who has been served with the subpoena may apply to the court for an order to set aside the subpoena. If it is a subpoena to produce documents, an application may also be made to narrow its scope (eg. by reducing the number of documents to be produced).

If the application to set aside or narrow the subpoena is successful, the applicant may apply to the court for an order that all or part of the applicant's costs incurred in applying to have the subpoena set aside or narrowed be paid by -

- (a) the party who served the subpoena; or
- (b) if the court finds the conduct of the party's lawyer in serving the subpoena was oppressive, vexatious or an abuse of process, the party's lawyer (rules 33 to 35 Criminal Practice Rules 1999).

The applicant must serve a copy of the application to set aside a subpoena on the person who served the subpoena (rule 33 Criminal Practice Rules 1999).

## Subpoena to produce medical or hospital records or records of a department of government or a statutory authority of the Commonwealth or State

If a subpoena requires the production of a medical record, hospital record or a record of a department of government, or a statutory authority of the Commonwealth or State, the served person may comply by giving the record to the proper officer of the court in a sealed envelope clearly marked "court exhibits" or something similar. The record is to be given to the proper officer at least 1 clear day before the time stated for production in the subpoena (rule 30 Criminal Practice Rules 1999).

If you wish to object to the record or part of it being inspected or copied you must give the proper officer a written statement stating the grounds for the objection (rule 31 Criminal Practice Rules 1999).



Department of Justice and Attorney-General

Office of the Director of Public Prosecutions

## Victim Liaison Service Survey

## Information for victims and their families

The prosecution of your matter is now at an end. As a result, we would like to invite you to provide feedback regarding the service you received from our Office.

Participation in this survey is voluntary.





## Are my responses anonymous?

Yes.

You do not need to provide your name or contact details to complete the survey. We will not be able to tell who completed the survey and you will not be contacted by our Office regarding your feedback.

If you have an enquiry that requires a response from our Office, or if you would like to make a formal complaint, please email or write to us at the address provided below.



Directorate

Office of the Director of Public Prosecutions GPO Box 2403 BRISBANE QLD 4001

or



MailboxODPP@iustice.gld.gov.au

## Do I have to complete the survey?

No.

Participation in this survey is voluntary.

If you decide not to complete the survey now but change your mind in the future, you may take the survey at a later date.

## Will my Victim Liaison Officer see the responses I provide?

No. The responses you provide will not ordinarily be sent to your Victim Liaison Officer.

However, you may indicate that you want some feedback to be passed on to your Victim Liaison Officer.

Please provide the name of your Victim Liaison Officer if you would like them to be advised of some specific feedback.

## How long will it take to complete the survey?

The survey should take between 10 and 15 minutes to complete.

The exact length of the survey and the number of questions you are asked will depend on your experience with the ODPP and the way the matter progressed through the courts.

## Do I have to provide my personal information?

No.

You will be asked to provide some personal details, such as your age and gender, however you do not have to answer these questions. You may select 'Prefer not to answer' if you wish.

## What if I don't know the answer to a question?

Most of the questions will allow you to answer 'Unsure' if you do not know the answer to the question.

## What type of questions will I be asked?

The purpose of the Victim Liaison Service is to ensure that victims of crime and their families are kept informed as their matter progresses through the criminal justice system. Another critical function of the service is to ensure victims are informed of external organisations who can provide specialised assistance and support.

Therefore, the survey focuses on whether our Office kept you up to date during the court process, and whether you were provided with factsheets about the criminal justice process and brochures about relevant organisations (such as Victim Assist Queensland).

You will also be asked some questions about the service you received, including whether ODPP staff treated you with respect, and adequately addressed your enquiries.

Most questions are multiple choice. You will also have an opportunity to provide general comments at the end of the survey.

### What will the results be used for?

Your responses will help us evaluate and improve the service provided by the Victim Liaison Service.

## Where can I access the survey?

The victim survey can be access at the website below. You will need to enter the password provided.

Website: https://www.surveymonkey.com/r/odppvlssurvey

Password: ODPPVLS

Please note, this is a generic password and will not identify you as the respondent.

Alternatively, if you would like to receive a hardcopy (paper version) of the survey, please write to us at the address below.

0

Directorate

Office of the Director of Public Prosecutions GPO Box 2403

BRISBANE QLD 4001

or



MailboxODPP@justice.qld.gov.au

### **Further information**

If you have any questions or need help, contact the ODPP in your region.

#### Freecall

P: 1800 673 428

## justice.qld.gov.au

P: (07) 3239 6840 F: (07) 3220 0035 DPPVictimLiaisonSupervisor@

instine ald any ou

justice.qld.gov.au

#### Beenleigh

Brisbane

P: (07) 3884 7070 F: (07) 3884 7077 ODPPVLOBeenleigh@ iustice.ald.gov.au

#### Cairns

P: (07) 4039 8444 F: (07) 4039 8888 ODPPVLOCairns@ justice.gld.gov.au

#### Ipswich

P: (07) 3280 1719 F: (07) 3812 0559 ODPPVLOIpswich@ justice.qld.gov.au

## Maroochydore

P: (07) 5470 8199 F: (07) 5470 8193 ODPPVLOMaroochy@ justice.qld.gov.au

#### Rockhampton

P: (07) 4938 4555 F: (07) 4938 4922 ODPPVLORockhampton@ justice.qld.gov.au

#### Southport

P: (07) 5583 6155 F: (07) 5532 2026 ODPPVLOSouthport@ justice.qld.gov.au

#### Toowoomba

P: (07) 4615 3438 F: (07) 4639 1759 ODPPVLOToowoomba@ justice.gld.gov.au

#### **Townsville**

P: (07) 4799 7328 F: (07) 4799 7330 ODPPVLOTownsville@ justice.qld.gov.au

ODPP-#2463591-v1 January 2017



## **Queensland Corrective Services Victims Register**

## Application to register

## What is the Register?

The Queensland Corrective Services (QCS) Victims Register is an information service established to provide certain information to eligible persons in regards to prisoners who have been convicted of offences and are serving a period of imprisonment, including parole, in accordance with s320 (1)(a), (b) or (c) of the Corrective Service Act 2006 (CSA 2006).

## Where can I get more information about the QCS Victims Register?

You can log onto the Queensland Corrective Services website at: www.correctiveservices.qld.gov.au

You can contact the Queensland Corrective Services Victims Register on the following:

Freecall: 1800 098 098

Email: <u>victims.register@dcs.qld.gov.au</u>

Mail: Victims Register

**Queensland Corrective Services** 

GPO Box 1054 Brisbane QLD 4001

### Who can Register?

In accordance with s320 (2) of the CSA 2006 in order to be eligible to apply for registration, you must be:

- the actual victim of an offence of violence or a sexual offence;
- an immediate family member of a deceased victim (meaning a victim's spouse, child, stepchild, parent, step-parent, sibling, stepbrother, stepsister, grandparent or legal guardian);
- a parent or guardian of a victim of a violent or sexual offence who has legal incapacity or who is under 18 years;
- another person who can provide a documented history of violence, including domestic violence, being committed against them by the prisoner;
- another person who can demonstrate that their life or physical safety may be endangered due to a connection to the offence for which the prisoner has been imprisoned.

NB. The prisoner must be serving a sentence, this includes parole.

## Department of Justice and Attorney-General Queensland Corrective Services

## What information may be provided?

If your application is approved, information will only be provided about a prisoner who is under the supervision of QCS.

Information that must be provided to an eligible person includes the prisoner's eligibility and release dates, date of discharge or release, death or escape or any other exceptional circumstances that could be reasonably expected to endanger the eligible person's life or physical safety.

Information that may be provided to an eligible person includes a prisoner's current location, security classification, transfers, the results of applications for parole and other exceptional events.

If the prisoner lodges an application for parole, other than exceptional circumstances parole, or the Attorney-General makes an application to the Supreme Court for an order under the *Dangerous Prisoners* (Sexual Offenders) Act 2003, eligible persons will be notified that they may make a written submission to the Parole Board Queensland or the Supreme Court.

#### **Privacy notice**

This application form is provided in accordance with the *Corrective Services Act 2006 s320 – s325.* QCS collects the information provided in your application form in order to establish your eligibility to register with the QCS Victims Register and for the following purposes:

- to enable the Department to provide certain information relating to the status of prisoner(s) against whom you have registered with the QCS Victims Register; and
- to enable the Department to discharge its legislative accountability and administrative function.

The QCS Victims Register will store your information securely. QCS will not disclose your personal information without your consent to the extent that it can be legally refused or unless satisfied on reasonable grounds that the disclosure is necessary to lessen or prevent a serious threat to your life or safety or unless legally required.

## Does the information provided to me need to remain confidential?

All information provided by the QCS Victims Register must be treated confidentially. Information from the Victims Register must not be disclosed for public dissemination by either the eligible person or their nominee.

This includes but not limited to disclosure of confidential information to any media outlet (e.g. television, newspaper, radio, the internet, book or other form of communication), distributing the confidential information in leaflets or brochures in letterboxes or by announcing the confidential information at a meeting.

Disclosure of this information publicly may result in completion of your registration and other penalties as described in s341 of the CSA 2006, including up to 2 years imprisonment.

An eligible person or their nominee may disclose relevant confidential information (such as the prisoner's discharge date) to a third party, for example a Domestic and Family Violence Support Service, for the purposes of obtaining support and assistance.

### How long does my registration remain current?

A registration will remain current until a prisoner has completed their sentence. However an eligible person may be removed from the QCS Victims Register in other circumstances, including where:

- the eligible person requests to be removed;
- the prisoner in relation to whom the person is registered dies in custody or in the community;
- the prisoner is transferred interstate or overseas;
- the eligible person discloses, for public dissemination, any prisoner information released to them by the QCS Victims Register;
- the QCS Victims Register is unable, after making reasonable efforts, to contact the eligible person; or
- until the child victim of an offence reaches 18 years and has legal capacity to apply with the QCS Victims Register in their own right.

### How do I apply for registration?

A person who wishes to apply for registration must complete and sign the attached Form 49 Application to Register with the Queensland Corrective Services Victims Register.

Should a person wish to apply for registration in relation to multiple prisoners, a Form 49 Application to Register with the Queensland Corrective Services Victims Register must be completed for each prisoner.

Completed applications should be emailed or posted to the address provided.

The QCS Victims Register seeks to provide information in a timely manner. Provision of an email address ensures the timely release of information.

## What happens after I submit my Application to Register?

Your application and the supporting documentation will be assessed against several criteria. It is your responsibility to provide documentation in support of your application. The Victims Register may seek further information or clarification from the Office of the Director of Public Prosecutions, the Queensland Police Service or the Courts.

An assessment will also be made if releasing information will affect the safety and security of QCS facilities, staff, prisoners and other persons.

Once your application has been processed, you will be advised of the outcome. If you are registered, your initial letter will provide information regarding the prisoner's current status.

If you are ineligible for registration you will be notified.

## Form 49

# **Application to Register with the Queensland Corrective Services Victims Register**

Version 5

Corrective Services Act 2006 (ss.320-325)

Date of sentence (if known):

	ctions. Please complete all section	s relevant to you.	
1. Details of the person wishing	to apply for registration		
Title:	☐ Mr ☐ Mrs ☐ Miss ☐ Ms	☐ Other	
Given name/s:			
Surname:			
Date of birth:	DD/MM/YYYY		
Email address:	55,		
Email address.	Linit/huilding no	Street no.	Street name
Residential address:	Unit/building no.	Street no	Street name
	Suburb/Town/City	State	Postcode
Postal address:	Unit/building no.	Street no	Street name
	Suburb/Town/City	State	Postcode
are unable to provide an email ad	of information from the QCS Victims Idress at the time you apply, correspo	ondence will be forwarded to your n	ominated postal address.
Failure to update your details ma time should you wish to commen	y result in your registration being cor ce receiving correspondence via ema	mpleted. You are able to call the uni ail at a later date.	t and update your details at any
It is your responsibility to ensure	that your contact/personal details are er's change in location is being asses	e kept up to date. This is necessary	as the QCS Victims Register
Your address will not be disclose	ed to the prisoner.		
Mobile number:	( )	Daytime/Alternative number:	( )
Do you identify yourself as:	☐ Aboriginal ☐ Torres Strait Isl	ander	
Is English your second language:	Yes No please specify language		
Do you require an interpreter:	☐ Yes ☐ No		
I have an impairment which may r	nean I need special assistance dealir	ng with Victims Register staff	☐ Yes ☐ No
If yes, please specify:			•
If you wish to speak with QCS Victim	s Register staff, you can contact the Na	tional Relay Service on 1800 555 6	60.
How did you hear about the QCS	Victims Register? ☐ Online ☐	Victim Advocacy Service  Othe	er, please specify:
2. Details of prisoner and offer	nce		
Please note that the QCS Victir	ns Register is only able to registend has been sentenced to a period	•	re registering against is
application must be accompar	nultiple prisoners' you are require nied by a certified copy of pro application. Only one copy of ider	of of identity and, if applicab	le, a certified copy of
Prisoner details			
Given name/s:			
Surname:			
Date of birth (if known):	DD/MM/YYYY		
Offence/s (if known):			
Date of offence/s (if known):			
Investigating police officer/station	ı (if known):		
Sentence (if known):			

### 3. Eligibility for registration

From the options below, please tick the box that applies to you and complete the relevant details for that section.

Category A		
You have had a criminal act of violence or a sexual offence committed against you (CSA s320(2)(a)(i))		Go to Section 4
Category B		
You are an immediate family member of a deceased victim of a criminal act of violence committed against them (CSA s320(2)(a)(ii))		□ <sub>Yes</sub> □ <sub>No</sub>
You are the parent of guardian of a victim of an offence of violence or sexual offence who is under 18 years of age or who has a legal incapacity (CSA s320(2)(a)(iii))		□ <sub>Yes</sub> □ <sub>No</sub>
Victims details		
Name of victim:		
Date of birth of victim:		
What is your relationship to the victim?  (e.g. are you the victim's mother, father, husband, wife, child, sibling etc). Please attach a certified copy of any documentation which provides evidence of your relationship to the victim e.g. Marriage Certificate, Birth Certificate, Statutory Declaration etc).		
Category C		
	icted of an offence of violence or a sexual offence and you can f the prisoner's history of violence against you (CSA s320(2)(iv)(A))	Yes No
Where a prisoner has been convicted of an offence of violence or a sexual offence and you can provide information that your life of physical safety could be endangered because of a connection between you and the offence (CSA s320(2)(a)(iv)(B))		
	nted history of domestic violence being committed against you by the prisoner's current conviction (CSA s320(2)(b)(i))	☐ Yes ☐ No
You can demonstrate that your lift domestic violence committed by	fe or physical safety may be endangered because of a risk of the prisoner (CSA s320(2)(b)(ii))	☐ Yes ☐ No

To be considered for registration under Category C, you **must** attach certified documentary evidence to support your application, for example:

- a Domestic Violence Order (current or previous);
- a statutory declaration made by you and witnessed by another person, who is one of the following:
  - Justice of the Peace;
  - · Barrister/Solicitor;
  - · Conveyancer; or
  - Commissioner for Declarations.
  - Documentary evidence from a Domestic Violence Support Agency

### 4. Nominee

Please only complete this section if you would like to nominate another person or agency to receive information on your behalf. If you nominate another person, the Victims Register will correspond only with the person/agency that you have nominated and you will have no further contact from the Victims Register until you advise otherwise.

Title:	☐ Mr ☐ Mrs ☐ Miss ☐ Ms ☐ Other		
Given name/s or agency:			
Surname:			
Relationship to victim:			
Date of birth:	DD/MM/YYYY		
Daytime telephone number:	( )	Mobile/alternative number:	( )
Email address:			
Postal address:	Unit/building no.	Street no	Street name
Postar address.	Suburb/Town/City	State	Postcode
Please note that a nominee must	sign, name or mark the declaration	section on the next page.	
5. Prisoner/Offender contact			
Do you have contact with the priso	ner of concern	☐ Yes ☐ No	
If yes, under what circumstances:			

### 6. Declaration

Please note that the QCS Victims Register will be unable to process your application if the declaration is not endorsed by you and your nominee (if applicable) or if certified identification documentation is not provided.

To also be completed by a parent or guardian of a person under the age of 18 years or if over 18 years has a

едаі пісарасіту.	
Applicant's declaration	
Please tick each box to demonstrate you	ur acceptance of these conditions
☐ I request that my details be entered	into the Victims Register, operated by Queensland Corrective Services.
	ormation provided by Queensland Corrective Services is confidential and I agree not to release this . I agree not to use this information for any unlawful purpose that could cause harm or detriment to
☐ I understand that misuse of the information from the Victims Register.	rmation provided to me by Queensland Corrective Services may result in my details being removed
	provide or update my contact details, Queensland Corrective Services may not be able to provide ay be removed from the Victims Register.
☐ I understand that when the child vic Victims Register in accordance with	tim turns 18 years and has legal capacity, I am no longer eligible to be registered with the QCS or CSA 2006 s320(2)(a)(iii).
Applicants who have nominated anot following:	ther person or agency to receive information on their behalf should also complete the
☐ I authorise Queensland Corrective Se nominee will receive correspondence ins	ervices to provide information to my nominated agent (if applicable) and understand that the stead of me.
Signature, name or mark of applicant	
Date	

Nominee's declaration (if applicable)	
The nominee should tick each box to der	monstrate acceptance of these conditions
I understand that the applicant name applicant's behalf.	ed above has nominated me to receive information from Queensland Corrective Services on the
	ormation provided by Queensland Corrective Services is confidential and I agree not to release this . I agree not to use this information for any unlawful purpose that could cause harm or detriment to
☐ I understand that misuse of the information from the Register.	mation provided to me by Queensland corrective Services may result in my details being removed
☐ I understand that if I choose not to p the service to me and my details ma	provide or update my contact details, Queensland Corrective Services may not be able to provide ay be removed from the Register.
☐ I understand that the eligible person	may remove me as a nominee at any time.
Signature, name or mark of nominee	
Date	
7. Proof of identity	
IMPORTANT Every application must be accompani the Peace or Commissioner for Deck	ed by certified proof of the applicant's identity, certified by a Solicitor/Barrister, Justice of arations.
Please indicate which document you have	ve attached (note, only one is required)
Current Australian Driver's Licence	Birth Certificate CurrentPassport
Other (eg. Statutory Declaration, Heal	th Care Card, 18 Plus card, Indigenous community organisation). Please specify:
Please do not send original documents.	Please send only copies.
8. Document checklist	
For your application to be considered, p documentation as outlined in the checkl	lease ensure that you have completed the necessary sections and attached all relevant ist:
☐ If you are applying under Categor	y A, have you attached a certified copy of a proof of identity document for yourself?
☐ If you are applying under Categor	y B, have you attached a certified proof of identity document and a document that
evidences your relationship to the	victim?
	y C, have you attached a certified document that supports your application (for example, a tutory Declaration or letter of support from a Domestic Violence Support Agency
☐ Have you understood and signed	the applicant's declaration?
If you have nominated another pe signed the nominee's declaration?	rson or agency to receive information on your behalf, has the nominee understood and

This application form is provided in accordance with the CSA 2006 s320 - s325.

Queensland Corrective Services collects the information provided in this application form for the following purposes:

- to enable the Department to provide certain information relating to the status of the prisoner/s against whom you have registered with the Victims Register; and
- to enable the Department to discharge its legislative accountability and administrative function.

The QCS Victims Register will store your information securely. The prisoner/s will not be informed of your registration.



OFFICE USE ONLY
CSA s 320 (2)(a)(i), (ii) or (iii) (Category A and B)
☐ Name, address, age validated
☐ Victim status verified by DPP, Police, Transcript etc. or
☐ Victim status verified by other means including supporting documentation
☐ Signed by applicant.
□ Proof of identity included. □ Certified
Nominee identity included and signed.
Other: Collateral check - Internal/External
☐ Information to be received
Registration approved Not approved Reason
Delegated officer Date:
CSA s 320 (2)(iv) and (b) Category C or prisoner
Name, address, age validated
☐ Verified by supporting documentation <b>Type</b>
☐ Victim status verified by other means.
☐ Signed by applicant.
Proof of identity included. Certified
Nominee identity included and signed.
Other: Collateral check - Internal/External
☐ Information to be received
Registration approved Not approved Reason
Senior delegated officer Date:

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