

# EVIDENCE OF IDENTITY

## WORKCOVER CONSTRUCTION INDUCTION CERTIFICATE

### WORKCOVER OHS CONSULTATION

Evidence of Identity (EOI) must be completed prior to conducting training for the OHS General Induction for Construction Work in NSW and OHS Consultation Courses. The evidence of identity form is to be retained by the WorkCover NSW Accredited Trainer or Approved Provider and may be called upon for review during an audit or in response to a complaint or compliance related issue.

Please nominate the course to be attended (tick appropriate box).

OHS General Induction for Construction Work in NSW       OHS Consultation

### PRIVACY COMPLIANCE STATEMENT

This information is collected and retained by the WorkCover NSW Accredited Trainer or Approved Provider.

This information is collected for the purpose of undertaking training required by the *Occupational Health and Safety Regulation 2001*. Information collected may also be used for the purpose of verifying your details, establishing and maintaining a database and assisting WorkCover NSW Accredited Trainers and Approved Providers with their work generally.

The information may be disclosed to and used by WorkCover NSW for the purposes of undertaking an audit. Unless disclosure is otherwise required by law, the information will not be accessed by any third parties in a way that would identify the individual.

Individual course participants can gain access to their personal information that is held by a WorkCover NSW Accredited Trainer or Approved Provider.

**ALL ITEMS IN SHADED BOXES MUST BE COMPLETED. PLEASE PRINT IN BLOCK LETTERS ONLY**

1. PARTICIPANT DETAILS			
Title	Family/Surname		
Given Names			
Other Name(s)			Date of Birth
Residential Address (number and street name)			
Suburb		State	Postcode
Daytime contact number		After hours number	Mobile Number
2. TRAINER/APPROVED PROVIDER DETAILS			
Trainer Accreditation/Approved Provider Name			
Date of Training			

**3. EVIDENCE OF IDENTITY (x appropriate box)**

EOI must be completed prior to conducting training for the OHS General Induction for Construction Work in NSW and the OHS Consultation Courses. You are required to show the Accredited Trainer or Approved Provider original documents of identity that add up to 100 points. Within these documents you must be able to show your photo, date of birth, signature and current address. It is the Accredited Trainer or Approved Provider’s responsibility to ensure that the relevant sections of the EOI form are complete, and to verify the EOI documentation provided.

Please Note: Exceptions to the standard EOI requirements are detailed under the Special Provisions section of the form. Section 3 is not required to be completed where Special Provisions apply.

Please complete the applicable Evidence of Identity details in the shaded box below. PLEASE PRINT IN BLOCK LETTERS ONLY.							
PRIMARY							Point Value
<input type="checkbox"/>	Passport	Number	<input type="text"/>	Country	<input type="text"/>	70	<input type="text"/>
<input type="checkbox"/>	Birth Certificate/Card (Australian)	Number	<input type="text"/>	State	<input type="text"/>	70	<input type="text"/>
<input type="checkbox"/>	Australian Citizenship Certificate	Number	<input type="text"/>			70	<input type="text"/>
SECONDARY							
<input type="checkbox"/>	Drivers Licence (Aust)	Number	<input type="text"/>	State	<input type="text"/>	40	<input type="text"/>
<input type="checkbox"/>	NSW Photo Card (RTA issued)	Number	<input type="text"/>	State	<input type="text"/>	25	<input type="text"/>
<input type="checkbox"/>	Motor Vehicle Registration/Insurance	<input type="checkbox"/> DVA Card	<input type="checkbox"/> Centrelink Card	<input type="checkbox"/> Property (Council) rates notice	<input type="checkbox"/> Property lease agreement	25	<input type="text"/>
<input type="checkbox"/>	Home Insurance papers	<input type="checkbox"/> Utility Bill	<input type="checkbox"/> Bank Statement/ lease agreement	<input type="checkbox"/> Medicare Card		25	<input type="text"/>
<input type="checkbox"/>	Credit/Savings Account (1)	<input type="checkbox"/> Credit/Savings Account (2)				25	<input type="text"/>
TOTAL POINTS							<input type="text"/>
TRAINER/PROVIDER USE ONLY							
CONFIRM <input type="checkbox"/> Date of birth sighted <input type="checkbox"/> Photo ID sighted <input type="checkbox"/> Current address sighted <input type="checkbox"/> Signature sighted							

**4. DECLARATION**

**PARTICIPANT’S DECLARATION**

I confirm my attendance at the OHS General Induction for Construction Work in NSW Course/OHS Consultation Course (mark the applicable Course) on the above date(s) and certify that the details above are correct.

Participant’s Name \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_ / \_\_\_\_ / \_\_\_\_

**TRAINER/PROVIDER DECLARATION**

I confirm I have sighted and confirmed the applicant’s Evidence of Identity against the original documentation.

Trainer/Provider’s Name \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_ / \_\_\_\_ / \_\_\_\_

*It is an offence under the Crimes Act 1900 and Occupational Health and Safety Regulation 2001 to make false or misleading statements in this application.*

**IF NO SPECIAL PROVISIONS APPLY, PLEASE DO NOT COMPLETE SECTION 5 OF THIS FORM.**

## EVIDENCE OF IDENTITY – SPECIAL PROVISIONS

Special provisions apply for course participants attending the OHS General Induction for Construction Work in NSW and OHS Consultation Courses.

- School sector (PART A)
- Correctional Centres (PART B)
- Aboriginal and Torres Strait Islanders (PART C)
- Overseas Persons recently arrived in Australia (for less than 6 weeks) (PART D)

5. SPECIAL PROVISIONS	
Title	Family/Surname
<input type="text"/>	<input type="text"/>
Given Names	Date of Training
<input type="text"/>	<input type="text"/> / <input type="text"/> / <input type="text"/>

Please tick the appropriate box and complete the section related to the Special Provision and the Declaration below:

**PART A – SCHOOL SECTOR – EVIDENCE OF IDENTITY DOCUMENTATION** (Points system does not apply)

1. The identity of the Student has been verified by sighting **one** of the following documents listed below:

Australian Birth Certificate/Card	Number	<input type="text"/>	State	<input type="text"/>
Passport	Number	<input type="text"/>	Country	<input type="text"/>
Australian Citizenship Certificate	Number	<input type="text"/>		

OR

2. The identity of the student has been verified by sighting a written statement on school letterhead confirming the student's name and date of birth.

Name of school and location

Date of Statement  /  /

Name and title of school official

OR

3.  The identity of the student has been verified by sighting a student ID card which contains the school crest/seal, photo, student's name and date of birth.

The Special Provisions applicable to the School Sector are based on the *Financial Transaction Reports Act 1988* "100 Point Check" Special Provisions (202)(2) Child under 18.

PART B – CORRECTIONAL CENTRES (Points value applies)				Point Value
The identity of the correctional centre inmate has been verified by sighting 100 points EOI from the table below. Original documents must be sighted.				
<input type="checkbox"/>	Birth Certificate/Card (Australian)	Number	State	70
<input type="checkbox"/>	Passport	Number	Country	70
<input type="checkbox"/>	Australian Citizenship Certificate	Number		70
<input type="checkbox"/>	Australian Drivers Licence (current)	Number	State	40
<input type="checkbox"/>	Medicare Card			25
<input type="checkbox"/>	Statement from Centrelink			25
<input type="checkbox"/>	Letter of verification of identity from the Department of Correctional Services			25
<input type="checkbox"/>	Correctional Centre MIN card			5
Correctional Centre name and location				
<input type="text"/>				
The special provisions applicable to Correctional Centres are based on an existing agreement between WorkCover NSW and the NSW Department of Correctional Services for National Certificates of Competency.				

