

Application for Exemption for Working with Children Check – Non-Staff

Please refer to the University's [Working with Children Check Policy](#).

This form is to be used by La Trobe business unit for assessing and logging exemption to hold a relevant valid WWC Check for non-staff (exclude vendors and contractors, see [Management of Working with Children page](#) for a list of non-staff) engaged by the University. Managers with delegated authority within each business unit can approve exemption if the non-staff satisfy **ALL** of the following criteria:

- Are not Engaged in Child Related Work; and
- Have no intentional interaction* with a child or children in the course of undertaking this work, activity or service; and
- Are Engaged on an infrequent and ad hoc basis, no more than 35 hours in a 12 month period; and
- Have never received a Negative Assessment Notice nor engaged in conduct that would result in a Negative Assessment Notice, should they be required to apply for a WWC Check.

* Intentional interaction is defined as interaction that is planned or premeditated.

Staff engaging the non-staff are required to support and verify the application.

The business unit representative is to forward this form to the relevant manager with delegated authority for review and sign off.

Section 1 THE APPLICANT

To be completed by the non-staff seeking exemption. This exemption form should **NOT** be used for non-staff who are contractors or companies. A [WWC Declaration Form](#) should be used instead.

Title (please tick an option) Ms Miss Mrs Mr Dr Other _____

Applicant Name:	Applicant email address:	Applicant Contact Number:
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Declaration:

I, declare that I satisfy **ALL** the criteria required for an exemption. I further declare that the information provided is true and correct and I am authorised to sign this declaration.

Signature Applicant	Date [DD-MMM-YYYY]	Please print name

La Trobe University respects the privacy of all individual's personal information. The University collects this information as part of the registration requirements under its Working with Children Policy. This information is only to be used for this purpose or where it is required or authorised by law. Under the [University's Privacy Policy](#), this information is considered private and confidential and must be treated in accordance to this policy.

Section 2 ENGAGEMENT DETAILS

Please provide start and end dates of the engagement with the University and describe the duties the individual has been engaged to perform having regard to the exemption criteria set out above.

The engagement cannot deviate from the details listed below as this would be a breach of the exemption conditions listed in the [Working with Children Policy](#).

Start Date: [DD-MMM-YYYY]:	End Date: [DD-MMM-YYYY]:
Estimated Number of Visits within the next 12 months:	Estimated Hours of Engagement within the next 12 months:
Name of Site Supervisor (if applicable):	Name of La Trobe University Business Unit Representative (If known):
La Trobe University Business Unit Name:	

Purpose, and nature of Engagement:

Section 3 OFFICIAL USE ONLY - AUTHORISATION

I, the Business Unit Representative who is requiring the engagement of the non-staff and I acknowledge that the information contained in Section 2 (Engagement Details) of this form is true and correct and I **support** this exemption.

Declaration Signature

Signature Business Unit Representative	Date [DD-MMM-YYYY]	Please print name

I, as Head of School /or Executive Director or Equivalent, has assessed and **approve** this exemption request.

Signature Head of School / Executive Director	Date [DD-MMM-YYYY]	Please print name

All exemption request form must be returned to the business unit's [Third Party WWCC Check Officer](#) for logging and secure storage.