



Wembley Primary School

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Government of Western Australia

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CONFIDENTIAL DECLARATION

This form is for persons requiring access to schools who are not employees of the Department of Education and Training

Please place a tick in one of the boxes below.

(1)	I declare that I <u>do not have</u> any convictions, circumstances or reasons that might preclude my working with or near children.	<input type="checkbox"/>
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or

(2)	I declare that I <u>do have</u> convictions, circumstances or reasons that might preclude my working with or near children. The nature of these convictions, circumstances or reasons is outlined below.	<input type="checkbox"/>

I certify the accuracy of the above information. I am aware that I may be required to provide a police clearance if it is considered necessary to verify the information provided.

Name: _____ Date: _____

(BLOCK PRINT PLEASE)

Signature: _____

Company: _____

Address: _____

Telephone: _____

Student Name: _____

Year / Room No: _____