Confirmation of Aboriginal and/or Torres Strait Islander Heritage			
Title:	First Name:	Middle Na	ime/s:
FAMILY NAME:		,	
Also known as: Maiden/community/traditional			
Date of Birth:	/ / Place of bir	th:	
Current Address:			
Occupation:			
I am of Aboriginal o	riginal or Torres Strait Islander descent, or both, <b>and</b>		
I identify as an Aboriginal person or Torres Strait Islander, or both, and			
I am recognised and acc	epted as such by the:		(name of community)
Signature of applicant			
Name of Organisation:			
Telephone:		Email:	
ABN:			
Department of Mines, Inc	dustry Regulation and Sa ssential. The applicant ha	afety in a position for vas requested that the	applicant is seeking employment with the which Aboriginal and/or Torres Strait Islander above mentioned Community Organisation
The Community Organisation verifies that the applicant: (Note: Tick relevant box/es that apply)			
is recognised and accepted by the abovementioned Community as an Aboriginal and/or Torres Strait Islander person; and/or			
Has provided evidence to verify their Aboriginal and/or Torres Strait Islander heritage.			
Date of meeting:/ Meeting resolution number:			
Affix Common Seal			
(Print name of authorised person)			(Signature of authorised person)