**Version 5.2**

**Application to Renew the Authorisation of an**

**Australian Government Authorised Officer (AAO)**

This form has been designed with the intention of being completed online.

Please ensure that ALL information requested below is completed in full, including full names, details and signatures.

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **1. Personal/Contact Details (AAO to complete)** | | | | | | | | |
| Applicants must ensure that their contact details are kept up to date using the form available on the department’s website at <https://www.agriculture.gov.au/export/controlled-goods/meat/elmer-3/change-aao> and must advise the AAO Coordinator by email at aao@aff.gov.au if any details change. | | | | | | | | |
| **Title: (Mr, Mrs, Miss, etc)** | |  | **Surname:** |  | | | | |
| **First Name:** | |  | | | | | | |
| **Other names:** (if applicable – include name at birth, previous married names, aliases) | |  | | | | | | |
| **Date of birth:** | |  | | | | | | |
| **Residential Address:** | |  | | | | | | |
| **State:** | |  | | | **Postcode:** | |  | |
| **Postal Address: If same as residential address write ‘As Above’** | |  | | | | | | |
| **State:** | |  | | | **Postcode:** | |  | |
| **Phone Number:** | |  | | | **Mobile Number:** | |  | |
| **Personal Email Address:** | |  | | | | | | |
| **I verify that the information provided above is true and correct.** | | | | | | | | |
| **Signature:** |  | | | | | **Date:** | |  |

|  |  |
| --- | --- |
| **2. Residency Status (AAO to complete)** | |
| **Has your residency status changed since your initial appointment?** | No – continue to section 3  Yes – continue below |
| **Residency Status (select one)** | Australian Citizen Permanent Resident Temporary Resident  **[Please provide a certified copy of your visa and/or passport]** |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **3. Current employment arrangement** | | | | |
|  | **Company Employee *---OR---*** |  | **Service Provider** | |
| **Name of Employer:** | | | |  |

|  |
| --- |
| **4. Name and registration number of primary registered establishment where AAO will be working** |
| Name and department registration number of all other export registered establishment(s) where AAO duties will be undertaken (if employed by a third party employer, list primary establishment name and number only) |

|  |  |  |
| --- | --- | --- |
| **5. AAO identification requirements** | | |
|  | Please provide a digital passport photo for your AAO ID Card – refer to photo requirements below. | |
| **Photo requirements** | | |
| **Photos must:**   * be provided in digital format via email to aao@aff.gov.au with a resolution of 200-300 dpi * have been taken within the past six (6) months * be colour, in sharp focus and clear * have a plain, light-coloured background and be taken with uniform lighting (no shadows across the face) * show you looking straight at the camera, and your head not tilted * be taken with a neutral expression (not laughing or frowning) with your mouth closed * be close up so that the head takes up between 32mm and 36 mm of the photo (see diagram) * show your eyes clearly through glasses – if you wear them – with no flash reflection off the glasses * show you without any hat or other head covering (if you wear a head covering for religious reasons, a photograph with you wearing it will be accepted, but your facial features from bottom of chin to top of forehead and both edges of your face must be clearly shown) | |  |

|  |  |
| --- | --- |
| **6. National Police Check** | |
|  | Please provide a certified copy of your recently attained (i.e. no more than six months old) National Police Check with your application.  ***NOTE****: For temporary residents, certified copies of NPCs must also be provided for each country you have resided in for 12 months or more over the previous 10 years prior to arriving in Australia.* |
| Appointment as an authorised officer is subject to the department’s satisfaction that the applicant is a suitable person to be appointed.  As part of the application process, you are required to undergo a National Police Check (**NPC**). Further information on police checks is available on the Australian Criminal Intelligence Commission website at: https://www.acic.gov.au/national-police-checking-service  The following information is to be provided on the application for an Australian NPC:  **Section 8 of the NPC application form - Purpose of NPC. The Code Number is 40.**  **NOTE:** AAO applications will not be processed until the National Police Check Certificate has been received by the department.  A criminal conviction or pending charge will not automatically exclude you from being appointed as an AAO. Assessment will be based on your fitness to perform the function of an AAO and uphold the integrity and reputation of the department. | |

|  |
| --- |
| **7. Disclosure of Conflicts of Interest** |
| You are required to provide details of any conflict of interest (real or perceived) that may exist, or may be likely to arise, if you are reappointed as an Authorised Officer to perform meat safety inspection services at any registered establishment. This must include detail of any positions of management or control that you currently hold, or have been offered or have previously held, in regard to the operations carried out in any registered establishment or with a labour hire provider. If the space below is insufficient, please continue on a separate sheet. |

|  |  |  |  |
| --- | --- | --- | --- |
| **8. Applicant Declaration for Re-Appointment** | | | |
| I,        being the applicant, apply for re-appointment as an Australian Government Authorised Officer (AAO) under the Export Control Act, and confirm that:   * The information that I have given and the statements that I have made in, or in connection with, this application are true and correct. * I understand that if the department holds information regarding my previous employment as a meat inspector and/or AO that adversely contradicts what I have stated or provided as part of my application, my application may be rejected. * I continue to abide by the Australian Public Service (APS) values and Code of Conduct at all times. * I continue to abide by the Workplace Health and Safety (WHS) law. * I continue to possess a Certificate IV in Meat Processing (Meat Safety) OR for Porcine Ante-mortem Inspectors,I continue to possess a Certificate III in Meat Processing (Livestock Handling) OR Certificate III in Meat Processing (General) OR Certificate III in Meat Processing (Meat Safety). * I understand and accept that appointment as an Australian Government Authorised Officer will not commence until my application is approved. * I understand and accept that I am fully responsible for the department issued AAO identification card, and must present this to a government officer or auditor upon request. | | | |
| **Signature:** |  | **Date:** |  |
|  |  |  |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **9. Employer Declaration for Re-Appointment** | | | | | |
| The application by       for re-appointment as an Australian Government Authorised Officer is supported by their employer  ***NOTE FOR ESTABLISHMENT MANAGEMENT: This section must be completed by a person listed within company management in the Certificate of Registration for any of the Registered Establishments listed in Section 1 of this form.***  ***NOTE FOR INDEPENDENT AAO EMPLOYMENT COMPANY: This section must be completed by a person listed within the independent AAO employment company management.*** | | | | | |
| **Address:** |  | | | | |
| **State:** |  | **Postcode:** | |  | |
| **Phone Number:** |  | **Mobile Number:** | |  | |
| **Email Address:** |  | | | | |
| **Employer Contact Name:** |  | | | | |
| **Position of Employer representative:** |  | | | | |
| **Signature** |  | | **Date** | |  |
| **Company Stamp** |  | | | | |
| **I verify that the information provided within this application is true and correct.** | | | | | |

|  |
| --- |
| **10. Protecting your privacy** |
| Personal information is defined in the *Privacy Act 1988* and means information or an opinion about an identified individual, or an individual who is reasonably identifiable.  Sensitive information is a subset of personal information and includes any information or opinion about an individual’s racial or ethnic origin, political opinion or association, religious beliefs or affiliations, philosophical beliefs, sexual preferences or practices, trade or professional associations and memberships, union membership, criminal record, health or genetic information and biometric information or templates. By completing this form you consent to the collection of all personal information, including sensitive information, contained in this form.  The Department of Agriculture, Fisheries and Forestry collects your personal information in this application form for the purpose of assessing your application for appointment and related purposes. If the relevant personal information requested in this application form is not provided by you, the department will be unable to assess your eligibility for re-appointment as an authorised officer under the Export Control Act.  The department may disclose your personal information, including your photograph, to other Australian agencies (including the Australian Federal Police and the Department of Home Affairs) and persons or organisations where necessary for these purposes, provided the disclosure is consistent with the Privacy Act. Your personal information will be used and stored in accordance with the Privacy Principles.  By completing and submitting this form you consent to the use and disclosure of personal information as provided above.  See the department’s Privacy Policy web page ([Privacy - DAFF (agriculture.gov.au)](https://www.agriculture.gov.au/about/commitment/privacy)) to learn more about accessing or correcting personal information or making a complaint. Alternatively, telephone the department on 02 6272 3933. |

|  |  |
| --- | --- |
| **11a. Check your application (for renewals after a five year appointment)** | |
| Please check that you have completed all required sections of this form and include certified copies of required documents. Refer to section 12 for information on certifying documents. | |
|  | Evidence of permanent residency or citizenship status (if applicable) (Section 2) |
|  | Digital passport photo (to the specifications provided in Section 5) |
|  | Certified copy of National Records Police Check Certificate (Section 6) |
|  | Disclosure of Conflicts of Interest completed (or marked nil if there are none) (Section 7) |
|  | The applicant declaration has been signed and dated (Section 8) |
|  | AAO Employer Declaration completed (Section 9) |
|  | Evidence of completion of Obligations of Third Party Authorised Officers training session (refreshed every five years) |

|  |  |
| --- | --- |
| **11b. Check your application (for renewals after 12 month appointment on a Cert III)** | |
| Please check that you have completed all required sections of this form (noting that sections five and six are not relevant) and include certified copies of all required documents. Refer to section 12 for information on certifying documents. | |
|  | Certified copy of Cert IV certificate including a copy of the transcript outlining the units completed. |

|  |
| --- |
| **12. Guidelines for the certification of documentation** |
| A certified document is valid when the certifying officer notes that the document is a certified copy of the original, they print their full name, provide their signature, write the date of certification and note their occupation (and length of service in any categories requiring a minimum service period) on the document.  The document must be signed by a person who meets the criteria to witness a statutory declaration under the *Statutory Declarations Act 1959*.   * **Example:** I certify that this document is an exact copy of the original document I have sighted.   Signature: John Smith  Name in full: John David Smith  Occupation: Bank Officer with 5 or more continuous years’ service  Date: 1 October 2015 |

|  |
| --- |
| **Send the completed application form and all required documents by email to:**  [**aao@aff.gov.au**](mailto:aao@aff.gov.au) |