

TREATY. IT'S TIME.

**FORM
ONE**

First Peoples' Assembly of Victoria | First Peoples' Assembly of Victoria Election Rules, Sections 3 – 5

APPLICATION FORM FOR ENROLMENT FOR THOSE WHO LIVE IN VICTORIA

DO NOT USE THIS FORM IF YOU ARE A VICTORIAN TRADITIONAL OWNER WHO IS LIVING OUTSIDE VICTORIA OR ARE IN PRISON, HOMELESS, IN OUT-OF-HOME CARE, OR IN THE ARMED FORCES.

PART A — PERSONAL DETAILS

I, the person whose name appears on this form, am applying to enrol to vote in the First Peoples' Assembly of Victoria elections.

FULL NAME

CURRENT RESIDENTIAL ADDRESS (If you do not currently have an address, please contact us)

UNIT / HOUSE NUMBER, STREET NAME, and SUBURB / TOWN

POSTCODE

DATE OF BIRTH (DD / MM / YYYY)

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You must be sixteen years old prior to the opening of voting period to vote.

If you do not know your date of birth, please contact us.

EVIDENCE TO VERIFY NAME, DATE OF BIRTH AND ADDRESS — COPIES MUST BE ATTACHED (mark all applicable boxes)

Any one document from this list

OR

Any two or more documents from this list that together show your name, date of birth and address

Driver Licence or Learner Permit

Firearm Licence

Keypass

Marine Licence

Proof of Age Card

Bank Card

Bank statement*

Birth Certificate

Commonwealth Government Concession Card (including Health Care Card)

Department of Veterans' Affairs Health Card

Lease Agreement

Marriage Certificate

Medicare Card

Student or Tertiary Institution Identification Card

Superannuation statement*

Utilities statement* (gas, water, electricity, mobile or home phone)

Valid Passport

Working with Children Check Card

* If you submit a bank, utility or superannuation statement, it must contain an official company letterhead or stamp.

Please contact us if you do not have access to the documents listed above.

PART B — CONTACT DETAILS

EMAIL ADDRESS (leave blank if you do not have an email address)

DAYTIME CONTACT NUMBER

AND / OR

MOBILE NUMBER

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POSTAL ADDRESS (if different to your current residential address)

UNIT / HOUSE NUMBER, STREET NAME, and SUBURB / TOWN

POSTCODE

PART C — VOTING METHOD

YOU MAY SELECT MULTIPLE OPTIONS. You can also request to vote online or by post by contacting us after submitting this form.

I want to vote in-person at a polling booth

I want to vote online

I want to vote by postal vote

FORM CONTINUES ON NEXT PAGE

PART D — FURTHER INFORMATION (OPTIONAL)

I wish to provide the following optional information:

NAME OF CLAN / NATION / MOB (optional)

GENDER (optional)

PART E — DECLARATION

FULL NAME

I declare that:

YOU MUST DECLARE ONE OPTION BELOW — (MARK A OR B ONLY):

A

I am a Victorian Traditional Owner and I live in Victoria.

OR

B

I am not a Victorian Traditional Owner but am an Aboriginal or Torres Strait Islander person and I live in Victoria.

I declare that:

- I am 16 years or older;
- I am an Aboriginal or Torres Strait Islander Person and
 - I identify as Aboriginal or Torres Strait Islander; and
 - I am a person of Aboriginal or Torres Strait Islander descent; and
 - I am accepted as such in the Aboriginal or Torres Strait Islander community;
- I am a Victorian Traditional Owner; and,
- I currently live in Victoria.

I declare that:

- I am 16 years or older;
- I am an Aboriginal or Torres Strait Islander Person and
 - I identify as Aboriginal or Torres Strait Islander; and
 - I am a person of Aboriginal or Torres Strait Islander descent; and
 - I am accepted as such in the Aboriginal or Torres Strait Islander community;
- I currently live in Victoria and I have lived in Victoria for 3 of the last 5 years. This can include multiple periods of time.

PRIVACY CONSENT STATEMENT

Your personal information provided on this form will be used by the First Peoples' Assembly of Victoria (Assembly) and its agents for the purposes of enrolling you to vote and administering the Assembly elections processes. This includes the administration of future elections, contacting you about the activities of the Assembly, and uses otherwise in accordance with our Privacy Statement. You may request access to any personal information that the Assembly may have collected about you, including correction of your personal information if you can establish that it is not accurate, complete or up to date using the contact details in our Privacy Statement found at www.firstpeoplesvic.org/privacy-statement.

During election periods, we may allow candidates for elections to the Assembly to contact you with information about why they are running. Your personal details will **not** be shared with individual candidates. If you do not wish to receive information from candidates, please tick this box.

By signing below, I declare that the information provided by me on this form is true and correct, and I consent to the collection of my information as specified.

YOU MUST SIGN HERE

DATE (DD / MM / YYYY)

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Please post completed application and copies of supporting evidence to:

116 Cardigan Street, Carlton, Victoria 3053
or email to: elections@firstpeoplesvic.org

NEED HELP?

Assistance is available by telephone 1800 TREATY (1800 873 289)