Department for Communities

Country High School Hostels **Ex Gratia Scheme**

Guide to Completing the Country High School Hostels Ex Gratia Scheme Application Form

The **Country High School Hostels Ex Gratia Scheme** (the Scheme) has been established to provide recompense to former students who were subject to abuse when boarding at a hostel administered under the *Country High School Hostels Authority Act 1960* between 1960–2006.

For further information about the Scheme go to **www.communities.wa.gov.au**

If you have any queries when completing your Application, ring **1800 246 768** (freecall) 9am to 4.30pm Monday to Friday or email **chsh@communities.wa.gov.au**

Important Information

- Ensure your Application is submitted by **5.00pm (WST) Friday 31 May 2013**.
- Late and unsigned Applications will not be accepted.
- Only one Application can be submitted per person.
- It is important to include as much information as possible about your experience at the hostel(s).
- Ensure all supporting documents are attached to the back of the Application Form.
- All Applications must be on the Scheme's official Application Form.
- Please ensure you have attached a certified copy of your proof of identity.
- You must be over 18 years of age to apply to the Scheme.

Notes

Legal representation is not necessary as this will incur unnecessary costs for applicants.

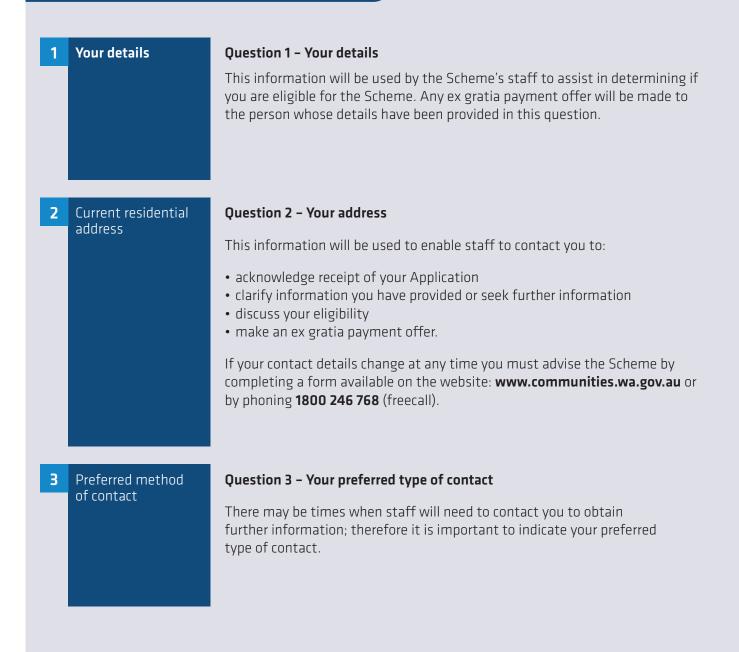
The Scheme provides ex gratia payments to adults who as children were abused while they were boarding in a country hostel under the *Country High School Hostels Authority Act 1960 (WA)* between 1960 and 2006.

If the application process has been distressing and you need to talk to someone, please phone the counselling hotline at Crisis Care on **1800 227 792.**



Government of **Western Australia** Department for **Communities**

Section 1 – Your details



4 Special Consideration	Question 4 – Special consideration (ill health)
(ill health)	The assessment of Applicants with a terminal or life threatening illness will be given priority. An initial assessment will occur on receipt of the Application and medical certificate. If you have a diagnosed terminal or life threatening illness it is important to attach a medical certificate for confirmation.
	Please note: If you are diagnosed with a terminal or life threatening illness after your Application has been submitted, it is important to inform the Scheme and provide a medical certificate confirming this. Assessment of Applications from persons with such illnesses will be given priority.
5 Current and past payments	Question 5 – Current and past payments
	You need to tell us if you have received any payment from the State Government or have commenced Common Law proceedings against the State Government, in relation to the same abuse details provided in this Application Form.
	Payment previously made by the State Government will be considered by the Scheme when determining an ex gratia payment offer.
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6 Referrals to the Western Australia Police	Question 6 – Referrals to Police
	Please note: Information related to person(s) that the Scheme reasonably believes are currently working with children will be referred to the Western Australia Police and the Department for Child Protection irrespective of whether permission has been obtained from you or your legal representative subject to section 129 of the <i>Children and Community Services Act 2004 (WA)</i> .

Section 2 – The Country Hostel(s)

7 The Country Hostel/s you boarded in

Question 7 - Details of the Country Hostel/s you boarded in

The information in this section will help the Scheme to locate any records that will determine your eligibility.

Please provide the name of the hostel and its location as well as your age and dates when you commenced and finished your boarding period.

If available, please attach copies of any documents that can verify you were a boarder at a country hostel.

Section 3 – Your Experience

8 Describe in your own words the abuse that you experienced while boarding in a country hostel

> Please include as much detail as possible about:

- where the abuse took place
- who the perpetrator was
- the approximate dates and/or your age at the time.

Question 8 - Describe the abuse you experienced as a Country Hostel boarder

This information will assist the Scheme to assess your Application and determine your eligibility to receive an ex gratia payment offer. If there is insufficient space to record all your details of the abuse you suffered, please record the information on a separate sheet (or sheets) of paper and attach to the back of the Application Form.

Please provide as much information as you can about the nature of the abuse, where it occurred, approximate dates and/or age at the time and who abused you. It is important to describe in your own words the abuse you remember.

As some people may find it difficult to remember specific details, please include any information you can remember, even if it is incomplete.

Please note: You will be contacted by telephone prior to your application being finalised. This phone call will give you the opportunity to provide any further information. You may also be asked to clarify information you provided in your original application.

9 Was the abuse reported to the Police, a Government Department (for example Education, Country High School Hostels Authority) and/or anyone else?

10 Details of the person(s) believed to have harmed you (if known)

Question 9 – Was the abuse reported to the Police, a Government Department and/or anyone else?

The information provided in this question will help the Scheme's staff locate any records, if required.

Question 10 – Details of the person(s) believed to have harmed you (if known)

Please provide as much information as possible about the person or persons you believe abused you while boarding in a country hostel.

Please note: Information related to person(s) currently working with children will be referred to the Western Australia Police and the Department for Child Protection. The information provided in this Application will **not** be disclosed by the Scheme to any other person, including any person listed on this Application Form, without your permission. You may choose to make a complaint to Police concerning abuse at any time.

Section 4 – **Proof of Identity**

A certified copy of one of the following documents must be attached to this Application as proof of your identity You must provide certified copies of your identification papers. Applications cannot be accepted without the appropriate documentation attached.

Please tick which copies of documents you have provided to verify your identity.

All copies must be certified by a person other than yourself.

Documents can be certified by any person who appears on the list at **Appendix A.**

Section 5 - Proof of Identity (without documents)

This section should be completed if you cannot provide any proof of identity documentation In some instances you may not be able to provide Proof of Identity documentation listed in **Section 4** because it does not exist or you live in a remote or isolated area. In these circumstances, you should complete **Section 5.**

Your Referee must have known you for a minimum of 12 months.

Section 5 must not be used if you can obtain your birth and/or marriage certificates by applying to the Registry of Births, Deaths and Marriages.

To obtain a birth or marriage certificate contact:

Registry of Births, Deaths and Marriages Level 10 141 St Georges Terrace Perth WA 6000

Telephone: 1300 305 021 Fax: (08) 9264 1599 Web: www.bdm.dotag.wa.gov.au

Section 6 - Claiming on your behalf

11 This section should only be completed by the Legal Personal Representative acting on your behalf

Question 11 - Legal Status

This section should only be completed by the Legal Personal Representative of an Applicant, if applicable.

Please provide details of the Legal Personal Representative of the Applicant.

A Legal Personal Representative is a person who is a:

- guardian or administrator within the meaning of the *Guardianship and Administration Act 1990*, or
- person who has been granted enduring Power of Attorney over the affairs of the Applicant.

Please tick the box which indicates the legal status of the Legal Personal Representative of the Applicant. **Please ensure a copy of your authority to act is attached to the Application form.**

Details of Legal Personal Representative

Please provide the name and contact details of the Legal Personal Representative.

Section 7 – Authorised assistance (if applicable)

12 Details of person Question 12 – Details of person authorised to assist with this Application authorised to assist with this This section should only be completed if you want to authorise another Application person to liaise directly with the Scheme on your behalf to help with the Application process. Please provide the name and contact details of the person authorised to liaise with the Scheme in relation to your Application. Any trusted person may be authorised by you to act on your behalf; for example, a friend or family member. Authorisation Question 13 – Authorisation 13 By signing this authorisation you will give the person named at Question 14 authority to do certain tasks on your behalf. Authority means the person named at Question 14 will be able to enquire and assist on your behalf to: discuss your Application with the Scheme • obtain information and documents about you from the Scheme, as the Scheme may lawfully provide.

Authority does not give the person named at Question 14 authority or permission to make any decisions, negotiate or accept an ex gratia payment offer on your behalf.

Section 8 – **Declaration**

Declaration by You or your Legal Personal Representative

Please read this section carefully before signing

This section requires you to sign and date the Application. This signature does not have to be witnessed. The Application should only be signed by:

• you, or

• your Legal Personal Representative.

Where you do not have a Legal Personal Representative, it is important that you sign the Application Form yourself so it is clear that you are endorsing that the information provided is true and correct.

The Scheme may seek further information or records from other Government departments or medical practitioners. The signature on the application form will be used as authority to release information from other sources if required to support an Application.

False and misleading applications

Before signing the Declaration you must ensure the information provided on the Application Form is true and correct to the best of your knowledge.

It is an offence to knowingly provide false or misleading information.

Appendix A

Persons Authorised to Certify Proof of Identity Documents (excluding Applicants living outside of Australia) The following persons can certify your Proof of Identity documents:

Academic (post-secondary institution) Accountant Architect Australian Consular Officer Australian Diplomatic Officer Bailiff Bank Manager Chartered Secretary Chemist Chiropractor Company Auditor or Liquidator Court Officer Defence Force Officer Dentist Doctor Engineer Industrial Organisation Secretary Insurance Broker Justice of the Peace Lawyer Local Government Chief Executive Officer or Deputy Chief Executive Officer

Local Government Councillor Loss Adjuster Marriage Celebrant Member of Parliament Minister of Religion Nurse Optometrist Patent Attorney Physiotherapist Podiatrist Police Officer Post Office Manager Psychologist Public Notary Public Servant (Commonwealth) Public Servant (State) Real Estate Agent Settlement Agent Sheriff or Deputy Sheriff Surveyor Teacher Tribunal Officer Veterinary Surgeon

Applications

Please telephone **1800 246 768** (freecall) 9am to 4.30pm Monday to Friday.

More information about the Country High School Hostels Ex Gratia Scheme is available at **www.communities.wa.gov.au**

Address

Please post the complete Application Form and any supporting documents to:

Department for Communities Reply Paid 80941 Perth WA 6000

Closing date

Applications open for six months from 30 November 2012 and will close at **5pm (WST) Friday 31 May 2013.**

Department for Communities

e: chsh@communities.wa.gov.au w: www.communities.wa.gov.au

National Relay Service TTY: 13 3677 (for people with hearing and/or voice impairment)

This document is available on request in alternative formats such as large print, audio file and braille.

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