

Confirmation of Aboriginality or Torres Strait Islander Descent

Applicant Declaration							
1					Date of Birth :		
I					Post Code		
(PLEASE PRINT IN BLOCK le	etters)						
	-			DENTIFY as being of A	Aboriginal	I &/OR To	orres Strait
Islander descent ar	nd am acce	epted as s	uch by:				
(Name of Community to w	rhom I am kno	own and acce	epted)				
(Name of Board Member/	Staff Member	of MOORUN	IDI ACCHS to wh	om I am known and accepted	d)		
Mothers details	DOB	AB/TSI	Community	Fathers details	DOB	AB/TSI	Community
		Y/N				Y/N	
Grandmother				Grandmother			
		Y/N				Y/N	
Grandfather				Grandfather			
		Y/N				Y/N	
Copy of Birth Cert	ificate or	any supp	orting docu	ment? Yes / No			
I make this solemn	declarati	on that I	absolutely a	ccept as true and co	rrect.		
Signature of Applicant							
Organisation Dec	laration						
Date of Meeting:				Signature:(Authorised Signatory)			
			N	ame:			
			Si	gnature:(Authorised Sig			
			N	ame:			

(Common Seal to be affixed)