

Confirmation of Aboriginal and/or Torres Strait Islander descent

Recognising organisation resolution

This form must be read together with the department's <u>Confirmation of Aboriginal and/or Torres</u> Strait Islander descent procedure.

Applicant/employee details	
Name of applicant/employee:	
Address of applicant/employee:	
Confirmation	
It is hereby confirmed that the above-named employment from the NSW Department of E they are an Aboriginal and/or Torres Strait Is	ducation, has provided sufficient evidence to indicate
 a. an Aboriginal and/or Torres Strait Islander person, meaning that one or both of their parents are Aboriginal and/or Torres Strait Islander persons; and b. identifies as an Aboriginal and/or Torres Strait Islander person; and c. is recognised as such by: 	
 □ the and has lived for years. □ the for years. □ the □ traditional area, or □ area where the applicant's family 	Community in which the applicant currently lives Community in which the applicant formerly lived Community, which is the applicant's: has lived for years.
(Organisation's Common Seal to be affixed)	
Resolution number:	Date of meeting:
Signature:	(Authorised Signatory)
Signature:	(Authorised Signatory)

Submit completed form to aboriginal employment@det.nsw.edu.au