



Nominee Form

You should use this form if you are nominating another person to apply to the scheme on your behalf. This person is referred to as your Nominee. A Nominee can provide and receive information about your application. A Nominee can also submit an initial application on your behalf but it must be signed by you.

The completed form should be returned to the scheme via email at fiskville.info@justice.vic.gov.au or via post: **Fiskville Redress Scheme, Department of Justice and Community Safety, PO Box 18217, Collins Street East, VIC 8003.**

Why would you have a Nominee?

You might choose to have a Nominee because you want someone to talk with the scheme on your behalf. This may be because you are unwell, are living with a disability, or find being reminded of your experience difficult.

Who should fill out this form?

The person applying to the scheme and their Nominee.

What does a Nominee do?

A Nominee acts on your behalf to help you with your application to the scheme. It should be someone that you are comfortable sharing your experience with.

You can choose what this help looks like. It can include:

- Assistance to complete the scheme's application form
- Receiving letters and communicating with the scheme
- Giving the scheme information about you, including updates about your contact details
- Accepting or declining an offer on your behalf

What you might want to think about before choosing a Nominee?

A Nominee should be someone who will act in your best interest. They should protect your privacy and feel confident to liaise with the scheme on your behalf.

If you would like to talk to the scheme about choosing a Nominee, please contact our support team for a free and confidential discussion.

What documents do the Nominee and I need to provide?

You need to provide us with a signed copy of the Nominee form. The Nominee also needs to provide a copy of their identification, such as a driver's license or passport.

Can I change my Nominee?

You can change your Nominee by contacting the scheme and filling out a new Nominee form.

Privacy Information for applicants and Nominees

The scheme is administered by the Department of Justice and Community Safety. It is independent of the Country Fire Authority (CFA) and at no time will any of the information you provide to us be shared with the CFA.

Your privacy is important and will be respected. We will only ask for information that is needed to confirm eligibility for the scheme and assess applications. The scheme will keep your personal information safe.

How to contact the scheme

Web: www.vic.gov.au/redress-fiskville

Phone: 1300 315 198

Email: fiskville.info@justice.vic.gov.au

Open: Monday to Friday, 9:00 am - 4:30 pm (excluding public holidays)

Your details (the person applying to the scheme)

Please complete the following information about yourself (the participant). In the next section, you will be required to complete information about your Nominee.

Date	D	D	M	M	Y	Y	Y	Y
Application ID								(leave this blank if you are not sure or have not yet been given an Application ID)
First name								
Middle name								
Surname								
Date of birth	D	D	M	M	Y	Y	Y	Y

Nominee Details (the person you are appointing)

Please complete the following information about your Nominee.

First name										
Middle name										
Surname										
What is the Nominee's relationship to you?										
Date of birth	D	D	M	M	Y	Y	Y	Y	Phone number	
Email address										
Postal address										
Nominee's preferred contact method			<input type="checkbox"/> Post <input type="checkbox"/> Email <input type="checkbox"/> Phone call <input type="checkbox"/> SMS							
I would like my Nominee to assist me with										
<input type="checkbox"/> Assistance to complete the scheme's application form <input type="checkbox"/> Receiving letters and communicating with the scheme <input type="checkbox"/> Giving the scheme information about you, including updates about your contact details <input type="checkbox"/> Accepting or declining an offer on your behalf <input type="checkbox"/> Other (please detail below)										

Nomination

I nominate _____

Name of Nominee

I authorise the person named above (the Nominee) to deal with the scheme on my behalf in accordance with my instructions in this form. I understand this process is voluntary and I can withdraw or change my Nominee at any time by contacting the scheme.

Name

Signature

Date

D D M M Y Y Y Y

Acceptance of nomination

I agree to be the Nominee for the participant listed on this form. I agree to provide information to the Department in accordance with the participant's instructions and to convey any information received from the Department to the participant (as relevant).

Name

Signature

Date

D D M M Y Y Y Y

Witness

I am not the person being nominated and I confirm the identity of the person being nominated is the person in the attached identification.

Name

Signature

Date

D D M M Y Y Y Y

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Fiskville Redress Scheme
Department of Justice and Community Safety
PO Box 18217, Collins Street East, VIC 8003