

# Stolen Generations Reparations Package

## Application Form

The Stolen Generations Reparations Package (Package) has been established by the Victorian Government to help address the trauma and suffering caused by the forced removal of Aboriginal and/or Torres Strait Islander children from their families, community, culture and Country.

To apply for the Package, you must complete this Application Form.

All fields in this form are mandatory, unless indicated otherwise.

The information you may need to consider can be confronting or disturbing and may cause sadness or distress. Funding is available for trauma-informed counselling. Please call 1800 566 071 for information.

24-hour support can also be accessed by contacting:

- VAHS Yarning SafeNStrong: 1800 959 563 (<https://www.vahs.org.au/yarning-safenstrong/>)
- 13 YARN: 13 92 76
- Lifeline: 13 11 14 (<https://www.lifeline.org.au/>).

The Package is administered by the Department of Justice and Community Safety (referred to as us/we/our/the Department).

### Eligibility for the Package

You are eligible to receive a Package if you:

- are an Aboriginal and/or Torres Strait Islander person **and**
- were first removed from your family by a government or non-government agency before 31 December 1976, while under the age of 18 years **and**
- were first removed in Victoria **and**
- were separated from your family for a period of time that resulted in the experience of loss of family, community, culture, identity and language **and**
- are living at the time of lodging your Application Form, and have lodged a valid application with all necessary supporting identification documents.

**You cannot apply for this Package on behalf of someone who has already passed.**

The Package is governed by the *Stolen Generations Reparations Package Guidelines*, which provide the rules and process for accessing the Package. The Guidelines are available on our website.

### Help is available to complete this form

You can seek support to complete this form by contacting us at:

- 1800 566 071 (9am-5pm, [Monday](#) to Friday)
- [stolen.generations@justice.vic.gov.au](mailto:stolen.generations@justice.vic.gov.au)
- Stolen Generations Reparations Unit  
Reply Paid 93288  
PO Box 24053  
MELBOURNE VIC 3001

Further information is also available on our website: [www.vic.gov.au/stolen-generations-reparations-package](http://www.vic.gov.au/stolen-generations-reparations-package)

You may also wish to speak with an organisation that supports Stolen Generations and their families including:

- [Bringing Them Home Program](#)
- [Connecting Home](#)
- [Link-Up Victoria](#)
- [your local Aboriginal Community Controlled Organisation \(ACCO\)](#).

You can nominate a person or organisation to complete this form and deal with the Department on your behalf.

They are referred to as your Nominated Support Person or Nominated Organisation.

Your Nominated Support Person or Nominated Organisation can submit this form, but it must be signed by you.

To nominate a Support Person or Organisation, you must complete *Form Two: Nomination of a Support Person or Organisation*.

## Support available to you

You can access support services throughout this process, including:

- trauma informed counselling
- legal advice
- financial counselling
- specialised supports if you have a disability

For further information please contact us.

## What happens after I submit this application?

- You will receive confirmation that your application has been submitted. You may choose how you receive this confirmation and how we contact you in your application form.
- We will contact you to offer access to support services and seek any further information we require.
- We will begin assessing your eligibility for the Package using the information you have submitted (the assessment and research phase).
- If you have provided consent, we will search records held by other government and non-government agencies for information relevant to your application. See **Part Four** of this form for further detail.
- When we have completed an initial assessment of your eligibility, we will refer your application to an Independent Assessment Panel (the Panel) to determine whether you are eligible for the Package.

## Funeral Fund

The Funeral Fund provides support to families of Stolen Generations who have passed away since 1 January 2021.

Eligible applicants will be given up to \$10,000 to cover the costs of a funeral, headstone or plaque and/or repatriation of their Stolen Generations family member.

The Fund is administered by Connecting Home Limited (CHL). For further information, contact CHL at [sgr@connectinghome.org.au](mailto:sgr@connectinghome.org.au) or (03) 8679 0777.

## Documents

- You must submit this form including all of the mandatory documents required for your application to progress.
- After you complete this form, we will contact you with information about any documents you are missing and provide you with access to an online portal to upload these documents. Alternatively, you may return these documents by email or by post.
- If you do not have access to these documents, or are having trouble uploading them, please contact us on 1800 566 071 for assistance.

## Application prioritisation

We will prioritise applicants based on age and personal circumstances (for example, poor health).

Applicants who have a terminal or critical illness may be eligible for an advance payment of \$20,000 on application. To apply for an advance payment, please submit *Form Three: Application for an advance payment*.



## PART ONE

### Information about you

This information is required to identify you as the person applying for the Package and let us know how we can best work with you, including contact information and supports you have in place. You will also be asked questions about your health. The health questions are optional but allow us to help prioritise applications.

If you are completing this form for someone else, complete the form with their details, then complete *Form Two: Nomination of a Support Person or Organisation*. You must have the person's permission to complete this form and they must sign the form.

<b>Q1</b>	<b>First name</b>	<input type="text"/>	<b>Middle Name</b>	<input type="text"/>
	<b>Last Name</b>	<input type="text"/>		
	<b>If known by any other name/s</b>	<input type="text"/>		
<b>Q2</b>	<b>Date of Birth</b>	<input type="text"/>	<b>Q3</b>	<b>Gender</b>
	<i>If known, to the best of your knowledge</i>			<input type="checkbox"/> Woman
				<input type="checkbox"/> Man
				<input type="checkbox"/> Self-described:
				<input type="text"/>
<b>Q4</b>	<b>Are you an Aboriginal and/or Torres Strait Islander person?</b>			<input type="checkbox"/> An Aboriginal person
	<i>You are an Aboriginal and/or Torres Strait Islander person if you:</i>			<input type="checkbox"/> A Torres Strait Islander Person
	<ul style="list-style-type: none"> <li>• identify as an Aboriginal and/or Torres Strait Islander person <b>and</b></li> <li>• are a person of Aboriginal and/or Torres Strait Islander descent</li> </ul>			<input type="checkbox"/> An Aboriginal and Torres Strait Islander Person
				<input type="checkbox"/> None of the above
<b>Q5</b>	<b>Phone</b>	<input type="text"/>	<b>Q6</b>	<b>Email</b>
				<input type="text"/>
<b>Q7</b>	<b>Residential address</b>		<b>Q8</b>	<b>Postal address (if different)</b>
	Street Address	<input type="text"/>	Street address or PO Box	<input type="text"/>
	Suburb/town	<input type="text"/>	Suburb/town	<input type="text"/>
	State	<input type="text"/>	State	<input type="text"/>
	Postcode	<input type="text"/>	Postcode	<input type="text"/>
<b>Q9</b>	<b>Preferred contact method</b>	<input type="text"/>	Phone	<input type="text"/>
			Email	<input type="text"/>
			Post	<input type="text"/>



**Q10 Form Assistance**

**Did someone assist you to complete this form?**

Yes

No

If yes, please provide their full name and relationship to you (for example, support worker, family member or friend):

**Accessibility**

**Q11 We will contact you to follow up on this form. Do you have any accessibility requirements, for example, do you use a Relay Service or require a disability support worker to assist you through the application process?**

Yes

No

Please provide details:

**Bank Account Information**

**Q12 Bank Details**

Please provide your bank account details for the deposit of financial reparations should your application be successful. Please note an Australian bank account must be provided. For all overseas accounts, please contact us to discuss.

**Name of Bank Account Holder**

**BSB Code**

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**Account Number**

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**Financial Institution (Bank) name**

**Q13 Bank Details Consent**

I hereby request that you direct credit the above bank account for amount/s to which I am found eligible by the Department of Justice and Community Safety.

**Name of Applicant**

**Signature of Applicant**

**Date**



### Application prioritisation

We will prioritise applicants based on age and personal circumstances. Applicants who have a terminal or critical illness may be eligible for an advance payment of \$20,000. See [Form Three: Application for an advance payment](#) on our website for more details on eligibility for this payment.

- Q14 Do you have a particular personal circumstance (for example poor or declining health) that we should consider in prioritising your application?**  Yes  No  I'm not sure

Please provide brief details

- Q15 Do you have a terminal or critical illness and are you seeking an advance payment**  Yes  No  I'm not sure

If yes, your doctor or medical professional must complete [Form Three: Application for an advance payment](#)

### Future planning

- Q16 Do you have a legal Will**  Yes  No  I'm not sure

If yes, please provide any details you have of your nominated executor or person who will administer your will. If this is an organisation, you can include their details.

We will only contact this person in the event you pass away before your application is finalised.

<b>Q17</b>	<b>First name</b>	<input type="text"/>	<b>Last Name</b>	<input type="text"/>
	<b>Company name</b>	<input type="text"/>		
	<b>Phone</b>	<input type="text"/>	<b>Email</b>	<input type="text"/>
	<b>Postal address</b>	<input type="text"/>		

### Powers of attorney, guardianship and administration

- Q18 Do you have a power of attorney?**  Yes  No  I'm not sure

If yes, please provide a certified copy of the power of attorney.



**Q19 Do you have guardianship or administration orders?**  Yes  No  I'm not sure

If yes, please provide a certified copy of the guardianship and/or administration order made by the Victorian Civil and Administrative Tribunal or similar.

If you answered yes to Q18 or Q19, please provide the details of your attorney, guardian or administrator (whichever applies).

<b>Q20</b>	<b>First name</b>	<input type="text"/>	<b>Last Name</b>	<input type="text"/>
	<b>Company name</b>	<input type="text"/>		
	<b>Phone</b>	<input type="text"/>	<b>Email</b>	<input type="text"/>
	<b>Postal address</b>	<input type="text"/>		

**Next of Kin information**

**How to nominate a next of kin**

In the section below, you must:

- choose a person to be your next of kin for the purposes of your application to the Package **and/or**
- state whether, if you pass away during the application process, you wish for your next of kin to be paid any financial reparations payments you are found eligible for under the Package.

**What is the role of your nominated next of kin?**

You should inform your next of kin that, if you pass away during the application process, they should contact us to make us aware (by ringing 1800 566 071 or emailing [stolen.generations@justice.vic.gov.au](mailto:stolen.generations@justice.vic.gov.au)).

If we become aware that you have passed away before your application is processed, we will continue to deal with your application as if you had not passed away. We will contact your next of kin to discuss the next steps in relation to the application and we will continue to contact them about your application as needed.

If you are found eligible for the Package, the State will have full discretion to determine who, if anyone, to pay your financial reparation to. In exercising this discretion, we will consider the following:

- the person who you have nominated as your next of kin and if you have stated that you wish for your next of kin to be paid your financial reparations payment if you pass away during the application process **and**
- the people who are entitled to your property under your will (if you have one) or the laws relating to the distribution of the property of people who have died without a will (intestacy).



**Q21a I hereby choose the following person as my next of kin:**

**Name of Next of Kin**

**Phone number of Next of Kin**

**Address of Next of Kin**

**Q21b If I pass away during the application process, I would like my Next of Kin to be paid my financial reparations payment if I am found eligible for the Package**

Yes  No

**Name of Applicant**

**Signature of Applicant**

**Date**

If you would like to nominate more than one next of kin or have any questions regarding this part of the form, please contact your Support Coordinator on 1800 566 071 (9am - 5pm, Monday to Friday) or via email at [stolen.generations@justice.vic.gov.au](mailto:stolen.generations@justice.vic.gov.au)

**If your application is successful, you can choose the content of your package**

Please select one or more of the following financial and restorative reparations:

**Financial reparations of \$100,000**

**A personal apology from the Victorian Government**

If yes, in what format:

Written

Telephone

Video Call

In person (If you choose to receive the apology in person/over the phone you will also receive a written apology)

If in-person, in what suburb/town would you like the apology to take place (include postcode):

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**Supported access to healing programs**

If yes, please select from the following options:

- Family reunion
- Reconnection to Country
- Language programs

Can you provide further information about what healing programs would look like for you (optional)?

If known, please provide your Mob or Country of your Aboriginal and/or Torres Strait Islander ancestry.

**The opportunity to record and share your story and experience**

If yes, how would you like to share your story:

- In writing
- A voice recording
- A video recording

If yes, do you want your story to be made publicly available?

Yes       No





### Access to support services

As a part of the Package, you have access to support services. More information about these services can be found on our [website](#):

#### Please indicate which services you would like to access:

- Trauma Informed Counselling
- Financial Counselling
- Legal Advice
- Disability Support Services

### Access to records held by the State about your removal\*

If you are found eligible for the Package, do you want a copy of the public records about your removal?

- Yes       No

If Yes, please select how you would like to receive these records:

- By Email       By Post       Both

*\*Please note: We have access to public records held by the Victorian Department of Families, Fairness and Housing; the Victorian Department of Justice and Community Safety; The Public Records Office of Victoria; and the National Archives of Australia. In some cases, these agencies may not have records about you or may provide limited records due to legal restrictions. We will contact you if this is the case.*



## PART TWO

### Information to support your eligibility

The following section will help us confirm your eligibility and process your application more quickly. If you consent, we will also perform a search of government and non-government agencies records to find information to support your application.

**Q22** Were you separated from family for a period of 3 months or more?  Yes  No  I'm not sure

**If not, please describe your experience of loss of family, community, culture, identity and language.** *If you require more space, please attach your statement to this application*

**Q23** Were you first removed from your family in Victoria by a government or non-government agency before 31 December 1976, while under the age of 18 years?  Yes  No  I'm not sure

**Q24** Further details you might know about your removal that will support our search. *If you require more space, please attach the additional information to this form.*

*Helpful information includes:*

- Any other names by which you have been known, which may be your name at birth, name before marriage, skin name or adoptive name.
- When you were removed (approximate date or year)
- Name of place you were removed from
- Ward Index Card number or Adoption File numbers
- Where you were removed to after being taken
- Name of organisation (such as adoption agency or church group) involved in your removal
- Names of your relatives (e.g., mother, father, brothers, sisters). *If you are in contact with your relatives, please advise them that you have provided their names to the Department as part of your application process.*

## PART THREE

### Supporting information

#### Confirming your identity

We require documents that prove your identity and a connection between yourself and the documents. You can provide a photo or scan of these documents. They do not need to be certified.

#### Accepted identity documents

You can provide any two of the following pieces of identification showing your name as it appears in this form. One piece of identification must show your date of birth. Eligible types of identification are:

- Driver's/learner's permit, firearm, or marine licence
- Proof of Age Card
- Keypass
- Commonwealth Government Concession Card (including Health Care Card)
- Department of Veterans Affairs Health Card
- Birth Certificate
- Working with Children Check Card
- Pensioner Concession Card
- Medicare Card
- Passport
- Bank Card (copies on both sides) issued by an Australian institution
- Bank Statement issued by an Australian institution
- Utility Statement (gas, water, electricity, mobile or home phone)
- Australian Taxation Office Assessment
- Student or Tertiary Institution Identification card
- Executed lease agreement

*If you do not have access to these documents, please contact us to discuss alternatives.*

#### Connecting you to the documents

You must also provide a photo of yourself holding one of your pieces of identification. The photo must show your face **and** your chosen identification document. This is to help us connect you with the evidence provided.

#### Change of name

If your name has changed since you were removed, you **must** provide evidence verifying your name change. Evidence can include:

- Marriage Certificate
- Registration of Name Change (Deed Poll)
- Adoption certificate or similar (contact us if you require help accessing this)
- Another official document verifying name change (such as Statutory Declaration)

*If you do not have access to these documents, please contact us to discuss alternatives.*

#### Other evidence you can provide to us

You have the option of providing us with copies of records about your removal if you have them. You do not have to provide this, but it may help speed up the processing of your application. We are seeking evidence which shows:

- That you were removed from your family
- That you were removed before 31 December 1976 (for example, a record with a date of removal)
- That you were removed when you were under the age of 18 years
- That you were first removed in Victoria (for example, a record stating where you were initially removed from)
- That you were removed by a government or non-government agency



- The period of your removal (for example, a record showing you were adopted or a record showing you were removed for more than three months, such as your wardship file)

### Supporting documentation of Aboriginality

Thank you for confirming that you are an Aboriginal and/or Torres Strait Islander person. To progress your application, supporting documentation of Aboriginality is required under the Stolen Generations Reparations Package Guidelines. *Please see question 4 for the definition of Aboriginal and/or Torres Strait Islander person.*

The Department recognises that requesting documentation in support of your Aboriginal and/or Torres Strait Island identity and descent may be distressing, and this is why support services, such as trauma-informed counselling, are available.

Please provide one or more of the following documents below to support your application:

**1: Letter from a Victorian Aboriginal community member**

Please attach a letter from a recognised Victorian Aboriginal community member that confirms your Aboriginal and/or Torres Strait Islander identity and descent. **(Please note:** This should be signed, dated, state the role/capacity in which the author is providing the letter and, wherever possible, be printed on letterhead, preferably from an ACCO).

**2: Aboriginal and/or Torres Strait Islander confirmation certificate**

Please attach an Aboriginal and/or Torres Strait Islander confirmation certificate witnessed by an Aboriginal Community Controlled Organisation. **(Please note:** If you do not already have one, the department does not require you to get a confirmation certificate to apply for the package).

**3: Outline of Aboriginal and/or Torres Strait Islander ancestry**

Please outline what you know about your Aboriginal and/or Torres Strait Islander ancestry in the text box below. Please include names of your Aboriginal and/or Torres Strait Islander relatives (for example, your mother, father and/or grandparents), their place of birth, your mob, and/or where your people are from.

*If you require more space or would like to provide documents from an agency or organisation to support your outline, please attach them to this application. Please provide documents on letterhead where possible or state the name of the agency or organisation who prepared them for you.*



## PART FOUR

### Privacy Consents and Declaration

**You, the Applicant, must respond to these statements yourself and enter your own name. You cannot respond to this page on behalf of someone else, even if they give you permission.**

#### Privacy statement

The Package is administered by the Department of Justice and Community Safety (Department).

The Department will collect, use, store and disclose your personal information and health information (including your sensitive information) provided in this document for the purposes of assessing your eligibility for the Stolen Generations Reparations Package (Package), provision of support services requested by you and, if your application is successful, payment and administration of your Package.

If you choose to do so, you can consent to the Department using your personal and health information to support the application of another person or persons (for example, a sibling) who have applied for the Package. Your information will not be used for any purposes other than to assess the eligibility of the person whose application you consent to support. Your information will not be disclosed to that person.

To assess your eligibility for the Package, the Department may collect and share information about your application from and with record holding departments and agencies both within and outside of Victoria. These agencies may be State and Commonwealth agencies, or organisations outside of government, which may include government-funded, private sector and not-for-profit organisations such as community-controlled organisations or Churches or organisations that administered orphanages. Your information will not be shared for any other purposes without further consent.

If you choose to nominate a person to collect and receive information on your behalf relating to your application, in accordance with *Form Two: Nomination of a Support Person or Organisation*, we may also collect and share your personal and health information from and with that person to progress your application.

The Department will provide your information (including personal information and health information) to an Independent Assessment Panel (Panel), who are engaged by the Department to determine eligibility for the Package. A Panel member may contact you about your application if they require further information or wish to make further enquiries on your behalf.

The Department will treat the information you provide, and the information it collects about you, with strict confidentiality and in accordance with Victoria's privacy laws. For further information about privacy, please refer to the Department's privacy policy on at [www.justice.vic.gov.au/your-rights/privacy/information-privacy-policy](http://www.justice.vic.gov.au/your-rights/privacy/information-privacy-policy) Our Privacy Policy explains how we collect, use, store and disclose your personal information and how you can access and seek correction of the information we hold about you as well as how to make a privacy complaint.

#### Consent to search records

Under relevant privacy laws, the Department requires your consent to undertake a search of government and other organisations' records concerning your removal to assess your eligibility for the Package. We also seek your consent to show other agencies and organisations this consent form, in order that they are clear that they have your authority to release the information to us.

The Department may search for information related to your removal in records held by State and Commonwealth agencies, or organisations outside of government, which may include government-



funded, private sector and not-for-profit organisations such as community-controlled organisations or Churches or organisations that administered orphanages both within and outside of Victoria.

If it is necessary for the Department to enquire into whether records of adoption exist in relation to you, you must agree to us (through the consent boxes below) communicating with other relevant organisations on your behalf to make such enquiries. If records do exist, you may be required to make an application under the *Adoption Act 1984* (Vic) to obtain the information and be able to rely on it for the purposes of this application. We can discuss this with you in further detail if this becomes relevant to you.

If required, and with your consent, the Department may also seek information held about you from community-controlled organisations that support Stolen Generations families, including Connecting Home Ltd, the Link Up Victoria service delivered by the Victorian Aboriginal Child Care Agency Ltd and organisations that support reconnection to Country, culture and family.

Records identified as part of these searches will be held securely by the Department and used only for the purpose of determining your eligibility for the Package.

If you appoint a person to receive and collect information relating to your application on your behalf (*Form Two: Nomination of a Support Person or Organisation*), you also consent to the Department sharing your personal and health information with your Authorised Person or Authorised Organisation for the purposes of progressing and determining your application.

You do not need to consent to these searches. However, if you do not, the Department will be required to consider your application based solely on the information that you provide in your application and any records you provide to us, which may impact on the chances of you being deemed eligible for the Package.

If you are not able to provide the Department with the information required to establish your eligibility, either through consenting to these searches or the sharing of your records with us, your application may be found ineligible.

## Declaration

I understand that my information will be handled consistent with the *Privacy Statement* above, the Department's Privacy Policy and applicable laws.

**AND**

I confirm that the information I have provided in this form is true and correct, including that I have a reasonable belief that I meet the eligibility criteria to apply for this Package. I understand that I may be asked for further information to support my application and I must respond accurately to these requests for further information in order for my application to be assessed. I understand that if the information I have provided is found to be incorrect or misleading, or I am otherwise found to be ineligible for the Package, the Department may seek repayment of, and I may be liable to repay, any benefits received and there may be other legal consequences.

**AND**

I **consent** to the Department collecting, using, storing and disclosing my personal information and health information (including my sensitive information) provided in this document for the purpose of supporting the application(s) of the following person(s) for the Stolen Generations Reparations Package:

AND

I **consent** to the Department providing this signed consent form to other government and non-government agencies and organisations and collecting and sharing records containing my personal or health information for the purposes of supporting my Stolen Generations Reparations Package application only.

OR

I **do not consent** to the collection or sharing of records containing my personal or health information. **I will instead provide the necessary records** to the Department myself.

**Name of Applicant**

**Signature of Applicant**

*Must be signed by the applicant, not a Nominated Support Person or representative of a Nominated Support Organisation*

**Date**

**This is the end of the Application Form.**

**Submit** your completed Application Form and supporting documents to:

stolen.generations@justice.vic.gov.au  
Stolen Generations Reparations Unit  
PO Box 24053  
Reply Paid 93288  
MELBOURNE 3001 VIC

You can also **complete this form online** at [www.vic.gov.au/stolen-generations-reparations-package](http://www.vic.gov.au/stolen-generations-reparations-package)

## Document Checklist

To submit a complete application, please ensure you have signed your application form (on the previous page) and included the following documents:

- Certificate of Aboriginality **or** Supporting Letter
- Two** forms of identification (one must show your date of birth)
- Name change documentation (*if you have had a legal name change*)
- A photo of you holding one form of identification
- Form 2 – Nomination of Support Person form (*if applicable*)
- Form 3 – Application for an advance payment (*if applicable*)
- Records supporting your application (*optional*)

## Definitions

Terms	Description
Privacy Policies	Privacy principles contained in the <i>Privacy and Data Protection Act 2014</i> (VIC)
<b>Health information</b>	<p>(a) information or an opinion about—</p> <p>(i) the physical, mental or psychological health (at any time) of an individual; or</p> <p>(ii) a disability (at any time) of an individual; or</p> <p>(iii) an individual's expressed wishes about the future provision of health services to him or her; or</p> <p>(iv) a health service provided, or to be provided, to an individual— that is also personal information; or</p> <p>(b) other personal information collected to provide, or in providing, a health service; or</p> <p>(c) other personal information about an individual collected in connection with the donation, or intended donation, by the individual of his or her body parts, organs or body substances; or</p> <p>(d) other personal information that is genetic information about an individual in a form which is or could be predictive of the health (at any time) of the individual or of any of his or her descendants.</p>
<b>Personal information</b>	Information or an opinion (including information or an opinion forming part of a database), that is recorded in any form and whether true or not, about an individual whose identity is apparent, or can reasonably be ascertained, from the information or opinion, but does not include information of a kind to which the <i>Health Records Act 2001</i> applies.
<b>Sensitive information</b>	Information about an individual's race, ethnicity, political opinions, religious or philosophical beliefs, sexual preferences or practices, criminal record, or membership of a trade union or professional, political or trade associations.