

YMCA REDRESS APPLICATION FORM

Please complete as much of this form as you are able to and feel comfortable with. You may also wish to have a support person assist you in completing the application form.

If you require additional assistance in completing the form or have any questions in relation to the application process, please feel free to contact:

Jacki Whitwell, YMCA Redress
Phone: 1800 981 123
Email: redress@ymca.org.au
Level 1, 88 Market Street, South Melbourne VIC 3205

If you would like to contact an independent person in relation to redress, please contact:

Phone: 1800 809 505
Email: redressinformation@gmail.com

There are some sections of the following application form which ask questions about the abuse that has occurred. We understand that these sections may be difficult to complete.

You are not required to complete all sections of the form, however the more information you can provide will assist the Redress Panel in providing a response to you.

Once the form is submitted to either of the contact points listed above, you may be contacted to follow up and further discuss your application.

Please ensure you inform us of your preferred method of contact and your relevant contact details.

PART 1 - APPLICANT DETAILS

Title:
(eg: Mr /Mrs /Miss /Ms /Dr)

Family name:

Given name(s):

Previous name(s):
*Please ensure you provide
the name you were known
by at the time of the abuse.*

Postal address:

Date of Birth:

Gender: Male Female Other

Contact phone number:

Email:

Preferred method of contact and any direction about contacting you:

*(Please include anything we may need to know about contacting you,
such as times to call, which number to call you on and whether or not
we may leave a message. Do you have a preference if a male or female
makes contact with you?)*

Please attach a certified copy of your proof of identity.

A certified proof of identity is a photocopy of an original proof of identity which is both signed and dated by an authorised person, and uses the following words: "I certify that this is a true copy of the original sighted by me."

Please refer to the list of authorised persons provided at the end of this form.

Please provide two forms of identity one which contains a photo of you.

Current driver's licence Yes No

Senior's card Yes No

Current concession card Yes No

Other recognised proof of identity Yes No

'Proof of age' card Yes No

Comment:

Current passport identification page Yes No

PART 2 -- DETAILS OF INCIDENT/S

When did the abuse occur?
(month, year if known)

Was the abuse a single incident or multiple incidents?

Over what period of time did the abuse occur?

What was your approximate age at the time of the abuse?

What was the YMCA facility, service or program at which the abuse occurred?
(if known)

In which city/town and state did the abuse occur?

What was the position, role or identity of the perpetrator, if known?
(Please provide any details you are able to)

Please provide a summary in your own words about what occurred.
(Please provide as much detail as you feel able. You may also wish to attach any previously prepared statements or relevant documents).

PART 3 – REPORTING

Was the abuse reported to anyone at the time?
(eg: parent, friend, teacher, YMCA, police?)

If reported at the time, what was the response and what were the outcomes or actions taken, if known?

Has the abuse been reported to the police or other authorities at any other time?

If there has been a report to police, what were the outcomes or actions taken, if known?

PART 4 – IMPACT ON YOUR LIFE

Please describe the impact of this incident/s at the time of the abuse, and subsequently.

(You may wish to consider emotional, social, economic, relationship impacts. We understand this may be difficult to complete, so please also feel free to attach any medical, psychological or counselling reports if you have these).

At the time of the abuse or subsequently, have you received any counselling, psychological care or other forms of support?

(Please describe the nature of this support, how frequently and over what period of time you have accessed this support)

Have you previously received a monetary amount or any other support from the YMCA in relation to the abuse?

Have you previously received a compensation payment (through civil litigation) from the YMCA for the abuse?

Which forms of redress are you seeking from the YMCA?

- Direct personal response (including an apology)
- Support with accessing counselling and psychological care
- Monetary payment
- A combination of some or all of the above.

Are there other outcomes you are seeking from the YMCA, or other actions you would like to see the YMCA take in response to your application for redress?

PART 5 – OTHER INFORMATION

Please provide any other details or information you feel will be relevant to your application for redress. You may wish to attach any additional information or documents to support your application.

The information provided in this form has been completed to the best of my ability and recollection

Your signature:

Date: / /

FOR OFFICE USE ONLY

| | | |
|-------|------------|---|
| Name: | Signature: | Date Received: <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> |
|-------|------------|---|

CONSENT FORM

USE AND DISCLOSURE OF PERSONAL INFORMATION

Personal information of individuals who apply for redress through the YMCA is treated as confidential and is managed in accordance with the Privacy Act 1988 (Cth), the Australian Privacy Principles and also where related legislation applies in the relevant state or territory pertaining to the redress application.

The YMCA Australia Privacy Policy provides further details about the management of personal information and a copy of the policy can be found here <http://ymca.org.au/Pages/privacypolicy.aspx>

In this form we seek your consent to the YMCA Redress Panel (and secretariat) and other agencies, persons or bodies, collecting and disclosing your personal information for the purpose of assessment of your application for redress and the subsequent response from the YMCA. In some jurisdictions there may be a legal requirement to report incidents or allegations of abuse to authorities.

Prior to contacting any specific agencies, persons or bodies for your personal information, the YMCA Redress Panel will endeavour to discuss this with you.

I agree and consent to:

- My relevant personal information held by any agencies, persons or bodies being provided to the YMCA Redress Panel (and secretariat) to facilitate an appropriate response to my application.
- The YMCA Redress Panel (and secretariat) collecting my personal information from other agencies, bodies or persons to facilitate an appropriate response to my application.
- The YMCA Redress Panel (and secretariat) providing my personal information to any other agency, body or person to whom it is necessary, to facilitate an appropriate response to my application.

Signature:

Full name:

Date: / /

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