# Care Leaver Records Request

Application form

# Your contact details

Surname	
Given name(s)	
Date of birth	
Address	
Address	
Postal address	
(if different from above)	
Email	
Phone number	

# **Request details**

No:

Are you seeking your own wardship records?

Yes:

If 'no', please provide details about the person whose records you are seeking:

Name	
Date of birth	
Relationship	

## Former ward details

Other names you've been known by	
<b>Parent name(s)</b> (including maiden name if known)	
Sibling name(s)	

### Additional information

Please provide any additional information you feel may be relevant to assist with your request. If insufficient space, please attach additional documentation to support your application.

Name of home(s) or agencies (if known)	
Date range of time in care	
Any other relevant information	

# How to submit your application

You can post your application to:

Care Leaver Records Service Department of Families, Fairness and Housing GPO Box 1774 Melbourne Victoria 3001

Or you can email your application to: clrs@dffh.vic.gov.au

# Checklist

#### Have you?

•Attached certified identification? (This is not required if a support worker or lawyer is applying on your behalf) •Given a clear explanation of the documents that you are requesting?

•Attached documents to support your application to access information about other people? (for example, a birth certificate or death certificate, if the person whose records you are requesting is deceased).