Victims of Crime Financial Assistance Scheme

VOCAT variation application form

When to use this form

The Financial Assistance Scheme (FAS) manages all requests to vary awards made by the Victims of Crime Assistance Tribunal (VOCAT). Use this form if you have received a VOCAT award and you wish to change your existing assistance or request a new expense or type of assistance.

The FAS can pay assistance up to your maximum assistance cap, which is \$60,000 for primary victims and \$50,000 for secondary victims. The maximum amount of assistance a related victim can receive from the FAS is \$50,000, as the maximum amount of the VOCAT related victim pool no longer applies.

Before completing this form, you <u>must</u> submit an application through the FAS online portal to transition your VOCAT application to the FAS. Access the portal at <u>https://fas.justice.vic.gov.au</u>.

If you have any queries about completing this form you can contact the FAS by phone.

FAS Helpline: 1800 161 136 Marra Yattakunar Team: 1800 849 778

You can also submit an enquiry online using the Enquiry Form in your FAS Portal

Form Contents

PART A: Application details

- PART B: Counselling expenses
- PART C: Medical expenses
- PART D: Safety-related expenses
- PART E: Loss of earnings
- PART F: Loss or damage to clothing expenses
- PART G: Recovery expenses
- PART H: Special financial assistance
- PART I: Loss of money (formerly known as dependency)
- PART J: Distress
- PART K: Funeral expenses
- PART L: Applicant acknowledgement
- PART M: Supporting document requirements

Filling in this form

- This form can be completed and signed electronically using a PDF reader on your computer such as Adobe.
- Alternatively, you can print and complete the form using black or blue pen.
- Print using BLOCK LETTERS
- Tick the appropriate box where applicable
- Sign the form
- Attach copies of supporting documentation where instructed (indicated with , and symbols throughout)
- If you need to provide more information, you can attach additional pages.

Further information about the documentary evidence required can be found on pages 19 - 20.

Returning this form

Send the completed form to:

financialassistancescheme@justice.vic.gov.au

or

Financial Assistance Scheme PO Box 21060 Little Lonsdale Street VIC 8011

Privacy

The FAS collects personal information for the purpose of assessing your eligibility for assistance. The FAS will only disclose your personal information in accordance with the law. More information on how the FAS handles your personal information can be found at www.vic.gov.au/privacy-vicgovau and

www.victimsofcrime.vic.gov.au/information-collection-notice.

Do you require legal assistance?

You may be able to obtain assistance from one of the following organisations:

- Victims Legal Service
 - Call 1800 531 566 or visit www.victimsofcrime.vic.gov.au/victims-legal-service
- Victorian Community Legal Centres

Call (03) 9652 1501 or visit www.fclc.org.au

Victorian Aboriginal Legal Service

Call 1800 064 865 or visit www.vals.org.au





Part A: Application Details

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Who are you making this application for?	6 Which sort of variation are you requesting?
Myself Go to Question 3	Minor variation – Change to your existing assistance, wh still gives effect to the original intention of your VOCAT award
Someone else (I am their Authorised Representative)	 Can include requesting: a change to the amount previously provided by VOCA (e.g. to cover an increase in a service provider's costs
If you are an Authorised Representative, provide your details below at Question 2 and then complete the rest of this form as if you were the applicant.	 more of the same treatment (e.g. additional counsellin sessions). You are allowed an unlimited number of minor variation applications.
Authorised representative's details Given name(s)	Substantive variation – New type of financial assistance new expense which VOCAT did not award you.
	Can include requesting a new:type of financial assistance that was not in your VOCA award
Family name	 expense that was not included in your VOCAT award. You are allowed only <u>one</u> substantive variation application
Drganisation (if applicable)	Minor variation
	Substantive variation
Applicant's name Pronouns	Which assistance does this request relate to? Select all that apply
(e.g. she/her, he/him, they/them, self-described (please specify))	You will need to explain how your needs or circumstances have changed, and why you now need an increase or additional assistance, or assistance which VOCAT did not
Given name(s)	originally award to you. If you are not seeking a variation for a particular type of assistance, you do not need to complete that Part.
Family name	Counselling expenses (all applicants) Go to Part B
Preferred name	Medical expenses (all applicants) Go to Part C
Date of birth	Safety-related expenses (primary victims) Go to Part D
	Loss of earnings (primary and secondary victims) Go to Part E
VOCAT Reference Number	Loss or damage to clothing (primary victims) Go to Part F
	Recovery expenses (incl. other reasonable expenses) Go to Part G (all applicants)
	Special financial assistance (primary victims) Go to Part H
	Loss of money (previously known as dependency) (related victims)
	Distress (related victims) Go to Part J
	Funeral expenses (all applicants where relevant) Go to Part K

Part B: Counselling expenses

More variation: Image: Interpret to the second se	Reaso	on for variation
I have a new counselling provider Complete question 9 I need additional counselling sessions Complete questions 9 - 12 Substantive variation: I need additional counselling sessions which I complete questions 9 - 12 What is the cost of one counselling session with your chosen provider? Image of the counselling sessions do you need? How many (additional) counselling sessions do you need? If more than 20 sessions in total (including any previously awarded by VOCAT, complete question 19 If you need more than a combined total of 20 counselling sessions, including any sessions that VOCAT has previously awarded, you must previously awarded by VOCAT, complete question 11 If you need more than a combined total of 20 counselling sessions, including any sessions that VOCAT has previously awarded, you must previously awarded by VOCAT, complete question 11 If you need more than a combined total of 20 counselling. This report must include a description of your mental health needs, the proposed treatment, cost of the treatment, the practitomer's opinion on the need for the additional sessions and whether the counselling report. If the FAS may pay for a report in some circumstances. Please select this option about what is inequired. If you aready have a counselling report. If the FAS may pay for a report in some circumstances. Otherwise, the FAS will not reimburse you for a regulation to the FAS instead, the FAS may pay for this report in some circumstances. Otherwise, the FAS will not reimburse you for a regulation to the FAS may pay to the FAS first requesting authorisation of a report. How will you provide a counselling	Minor \	variation:
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You need to explain how your needs or circumstances have changed since receiving your VOCAT award, and why you are now seeking		I already have a counselling report I can provide

Part C: Medical expenses

13	Reason for variation		
	Minor variation:		
	My service provider has increased their fees Complete question 14		
	I have a new service provider for the expense Complete question 14		
	□ I need more of the same treatment or therapy Complete questions 15 - 16		
	Substantive variation:		
	I need medical expenses which VOCAT did not award Complete questions 15 - 16		
14	Please provide updated pricing from your service provider, or pricing details fro	om your new service pi	ovider
Ē	Please enter the name of the treatment or expense, and the new total cost for the expense		
┛┈┺			
15 Ē	Please provide detail on your medical expenses, including whether you are clai authorisation for a <u>future</u> expense	ming a <u>past</u> expense,	or seeking
┛═┲	Name of treatment/expense	Amount	Past/Future Expense?

Why do you need (additional) medical treatment or therapy?

You need to explain how your needs or circumstances have changed since receiving your VOCAT award, and why you are now seeking (additional) medical treatment.

16	
J	

Part D: Safety-related expenses

17	Reaso	n for variation			
	Minor va	ariation:			
		My service provider has increased their fees		Complete question 18	
		I have a new service provider for the expense	►	Complete question 18	
		I need more of the same expense		Complete questions 19 - 2	21
	Substar	ntive variation:			
		I need safety-related expenses which VOCAT did not award		Complete questions 19 - 2	21
18	Pleas	e provide the updated pricing from your	se	rvice provider, or pric	ing details from your
Ē	Pleas	e enter the name of the expense, and the new to	otal o	cost for the expense	

Please provide detail on your safety-related expenses, including whether you are claiming a <u>past</u> expense, or seeking authorisation for a <u>future</u> expense, as well as how the expense is directly related to the incident.

Name of item/expense	Amount	Past/Future Expense?
How is this expense related to the incident?		

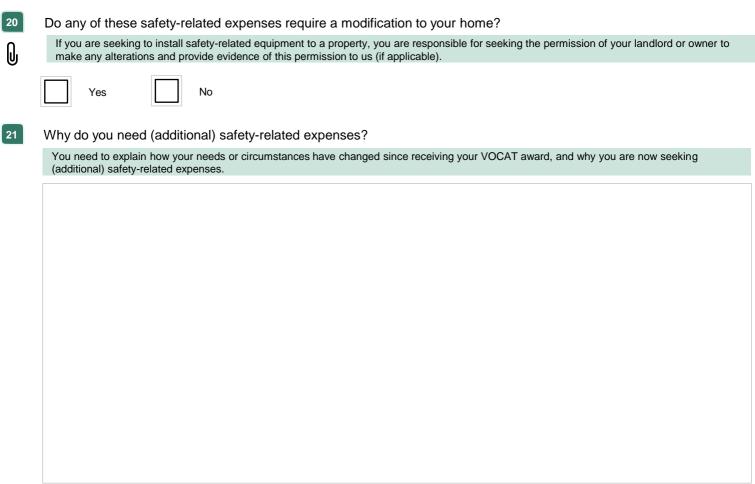
Name of item/expense	Amount	Past/Future Expense?
How is this expense related to the incident?		

19

F

new service provider

Part D: Safety-related expenses cont.



Part E: Loss of earnings

22	Reason for variation
	Minor variation:
	I need more of the same assistance ► Complete questions 23 - 24
	Substantive variation:
	 I need loss of earnings assistance which VOCAT did not award Complete questions 24 - 27
23	Have you lost further earnings as a result of the incident?
Û	You must be able to show that you have a continued inability to work because of the incident. This can only be for a period of up to 2 years after the incident.
-	Yes
	No Vou are not eligible for assistance for loss of earnings
24	Why do you need (additional) loss of earnings assistance?
	You need to explain how your needs or circumstances have changed since receiving your VOCAT award, and why you are now seeking
	(additional) loss of earnings assistance. If you are a secondary victim you must also explain why your circumstances are exceptional.
25	Have your earnings stopped or reduced as a result of the incident?
0	You must be able to show that you have been unable to work because of the incident, whether wholly or partially. This can only be for a period of up to 2 years after the incident.
	Yes

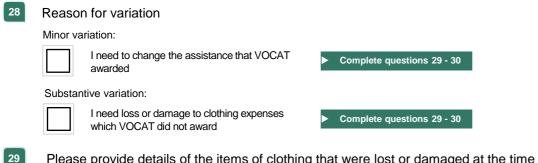
No

You are not eligible for assistance for loss of earnings

Part E: Loss of earnings cont.

ABN					
Gross oar	nings (pre-injury)				
lf you d	o not receive a regular ar	nount, please calculate you	r average earnings over the last 3	3 financial years a	and represent this as a weekly
fortnigh	tly or monthly amount				
Frequency	y of gross earnings (e.g. we	ekly, fortnightly, monthly)			
	Weekly				
	Fortnightly				
	Monthly				
	lost earnings				
Start date		Start date		Start date	
End date		End date		End date	
l eave ent	itlements used because o	of your injury (include type)	of leave, start and end date(s) and	d the amount you	received for the period(s) of la
Do you	have any other incor	me entitlements?			
			ne that you have received, or are n insurance, WorkCover, Transpo		
other pa	ayment or assistance. You	u must provide information at are related to the incider	about any other payments you ha	ave received from	other schemes since the VOC
	No				
	Yes Give detail	ls below			
Details o	f other payments or assis	tance – include the name of	f the entitlement and the total am	nount received or	likely to receive in future

Part F: Loss or damage to clothing expenses



Please provide details of the items of clothing that were lost or damaged at the time of the incident, including whether you are claiming a <u>past</u> expense, or seeking authorisation for a <u>future</u> expense

∎ III	Item of clothing	Value	Lost or damaged?	Past/Future Expense?

Why do you need (additional) loss or damage to clothing expenses?

You need to explain how your needs or circumstances have changed since receiving your VOCAT award, and why you are now seeking (additional) loss or damage to clothing expenses.

....

Part G: Recovery expenses (incl other reasonable expenses)

	n for variation ariation:			
	My service provider has increased their fees	 Complete question 32 		
	I have a new service provider for the expense	Complete question 32		
	I need more of the same expense	Complete questions 33 - 34		
Substa	ntive variation:			
	I need recovery expenses which VOCAT did not award	Complete questions 34 - 36		
Pleas	se enter the name of the expense, and the new	total cost for the expense		
Pleas	e provide detail on your recovery expe		iming a <u>past</u> expens	se, or
Pleas			iming a <u>past</u> expens	se, or Past/Future Expense?
Pleas	e provide detail on your recovery expe ng authorisation for a <u>future</u> expense			Past/Future
Pleas	e provide detail on your recovery expe ng authorisation for a <u>future</u> expense			Past/Future
Pleas	e provide detail on your recovery expe ng authorisation for a <u>future</u> expense			Past/Future

Why do you need (additional) recovery expenses?

34

(J)

You need to explain how your needs or circumstances have changed since receiving your VOCAT award, and why you are now seeking (additional) recovery expenses.

Part G: Recovery expenses cont.

35

Why are your circumstances exceptional?

To be eligible for recovery expenses, you must explain why your circumstances are exceptional. Exceptional circumstances mean that the victim's circumstances are unusual, special, out of the ordinary, rare or outside reasonable anticipation or expectation



Please provide detail on your recovery expenses, including whether you are claiming a <u>past</u> expense, or seeking authorisation for a <u>future</u> expense, as well as how the expense will directly assist your recovery from the violent act

Name of item/expense	Amount	Past/Future Expense?
How will this expense assist your recovery?		

Name of item/expense	Amount	Past/Future Expense?
How will this expense assist your recovery?		

Part H: Special financial assistance



How have your circumstances changed since receiving your VOCAT award?

You need to explain how your circumstances have changed since receiving your VOCAT award, and why you are seeking a change to your special financial assistance, or why you are now seeking special financial assistance when it was not originally awarded by VOCAT. Your change in circumstances must be related to your eligibility for special financial assistance.

nonev (nreviously known as dependency) Part I: Loss of r

F	20000				
	Reaso	n for variation			
	Minor va				
		I need to change or in VOCAT awarded	ncrease the assistance that	► Complete question 39	
;	Substar	ntive variation:			
		I need loss of money	assistance which	► Complete questions 39 - 40	
		VOCAT did not awar	d		
	Why d	lo you need (addit	tional) assistance for l	oss of money?	
	You n	eed to explain how yo	our needs or circumstances	have changed since receiving your VOCAT award, and why you are now seeking	
1	(additi	ional) assistance for lo	oss of money.		
	0.h 4				
		your loss of mone	-		
		your loss of mono you expected to receiv	-		
		-	-		
	Amount	you expected to receiv	/e	ahtiv. monthiv)	
	Amount	you expected to receiv	-	ghtly, monthly)	
	Amount	you expected to receiv	/e	ghtly, monthly)	
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	Amount	you expected to receiv cy of payments for abov Weekly	/e	ghtly, monthly)	
/ F		you expected to receiv cy of payments for abov Weekly Fortnightly Monthly	ve re amount (e.g. weekly, fortni		
/ F	Amount Frequence	you expected to receiv cy of payments for abov Weekly Fortnightly Monthly	e this money from your love	ed one?	
/ F	Amount Frequence	you expected to receiv cy of payments for abov Weekly Fortnightly Monthly	e this money from your love		was
) F [Amount Frequence	you expected to received by of payments for above Weekly Fortnightly Monthly d you expect to receive ust have expected to ed to be received after	e this money from your love	ed one?	was
) F [Amount Frequence	you expected to receiv cy of payments for abov Weekly Fortnightly Monthly d you expect to receiv ust have expected to	e this money from your love	ed one?	was
) F [Amount Frequence	you expected to received by of payments for above Weekly Fortnightly Monthly d you expect to receive ust have expected to ed to be received after Date or date range:	e this money from your love	ed one?	was

Part J: Distress

	for variation
Minor vari	
	I need to change the assistance that VOCAT Complete question 42
 Substanti	ive variation:
	I need financial assistance for distress which
	VOCAT did not award
How ha	ave your circumstances changed since receiving your VOCAT award?
financia	ed to explain how your circumstances have changed since receiving your VOCAT award, and why you are seeking a change to your al assistance for distress, or why you are now seeking financial assistance for distress when it was not originally awarded by VOCAT. in circumstances must be related to your eligibility for a distress payment.
Details	of your loved one that passed
Details Given nar	
	ne(s)
Given nar	ne(s)
Given nar	ne(s)
Given nar	ne
Given nar Family nar	ne
Given nar Family nar	ne
Given nar ⁼ amily nan Date of birt	ne ne
Given nar ⁼ amily nan Date of birt	ne
Given nar ⁼ amily nan Date of birt	ne ne th of the following best describes your relationship to your loved one?
Given nar ⁼ amily nan Date of birt	ne ne
Given nar ⁼ amily nan Date of birt	ne (s)
Given nar ⁼ amily nan Date of birt	ne ne th of the following best describes your relationship to your loved one?
Given nar ⁼ amily nan Date of birt	ne (s)
Given nar ⁼ amily nan Date of birt	me(s) ne th f the following best describes your relationship to your loved one? Spouse or domestic partner Child or step-child
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Given nar ⁼ amily nan Date of birt	ne(s) ne th f the following best describes your relationship to your loved one? Spouse or domestic partner Child or step-child Parent, guardian or step-parent Sibling or step-sibling Intimate personal relationship

Part J: Distress cont.

45

J

Can you tell us about your relationship with your loved one? Please provide details about the nature of your relationship with your loved one at the time they passed away. If you selected 'Dependant' in

the question above, please also provide details about how you were financially dependent on them.

Part K: Funeral expenses

46	Reason for variation		
	Minor va	ariation:	
		My service provider has increased their fees	 Complete question 47
		I have a new service provider for the expense	Complete question 47
		I need more of the same expense	Complete questions 47 - 48
	Substar	Substantive variation:	
		I need funeral expenses which VOCAT did not award	► Complete questions 47 - 48

47 []]

48

	are claiming a <u>past</u> expense, or seeking authorisation for a <u>future</u> expense			
	Date of funeral	Amount	Past/Future Expense?	

Please provide detail on your funeral expenses, including the (new) total cost of the funeral and whether you

Why do you need (additional) funeral expenses?

You need to explain how your needs or circumstances have changed since receiving your VOCAT award, and why you are now seeking (additional) funeral expenses.

Part L: Applicant acknowledgement

Summary

For applicants applying on their own behalf, this acknowledgement confirms that you agree to the Victims of Crime Financial Assistance Scheme (FAS) collecting and disclosing your information to process your application. You are also acknowledging the information provided in the application is true and not false or misleading, that you may be required to repay assistance, and that you agree to keep the FAS up to date about changes in your circumstances. You are also agreeing to the Victims of Crime Assistance Tribunal (VOCAT) and Court Services Victoria (CSV) disclosing your personal and health information to the FAS.

For Authorised Representatives applying on behalf of a victim seeking assistance (the applicant), this acknowledgment confirms that the applicant agrees to the FAS collecting and disclosing their information to process their application. You and the applicant are also acknowledging the information provided in the application is true and not false or misleading, that the applicant may be required to repay assistance, and that you and the applicant agree to keep the FAS up to date about changes in the applicant's circumstances. The applicant is also agreeing to the Victims of Crime Assistance Tribunal (VOCAT) and Court Services Victoria (CSV) disclosing their personal and health information to the FAS.

You can contact the Victims of Crime Financial Assistance Scheme (FAS) Contact Centre if you have any questions before signing. If you have any concerns about signing, you should seek advice.

Truth of the information supplied

I declare that the information I have provided in this application and attached documents is true and not misleading.

I acknowledge that it is an offence to provide false or misleading information in relation to an application under section 66 of the *Victims of Crime (Financial Assistance Scheme) Act 2022* (Vic) (FAS Act) and it may impact the outcome of the application. I also acknowledge that it is an offence to obtain or attempt to obtain assistance fraudulently under section 65 of the FAS Act.

I also acknowledge that under sections 18 and 22 of the FAS Act, the applicant is required to disclose any relevant compensation, assistance, payment or entitlements from other schemes (see section "other schemes or assistance") received before lodging this application.

Keeping the FAS up to date

I agree to disclose to the FAS any compensation, assistance or payment received from other schemes after lodging this application, including during the assessment period.

I agree to advise the FAS if my (or in the case of an Authorised Representative applying on the applicant's behalf, the applicant's) circumstances change or if I become aware of any matter that would make the information in this application form false or misleading.

Repayments

I acknowledge that I (in the case of an applicant applying on their own behalf) or the applicant (in the case of an Authorised Representative applying on the applicant's behalf) may be required to repay any assistance under sections 37 and 50 of the FAS Act. Repayment could be required in circumstances including if I (in the case of an applicant applying on their own behalf) or the applicant (in the case of an Authorised Representative applying on the applicant's behalf) have/has received any damages, compensation, assistance or payments from another scheme that were not taken into account when determining the amount of assistance, if the amount of assistance is decreased on review or variation, or if interim assistance is paid but the application is later refused.

Continued on next page.

Part L: Applicant acknowledgement cont.

Acknowledgement of collection notice and privacy policy for applicants submitting an application on their own behalf – Consent to disclosure of personal and health information

I have read the <u>collection notice</u> and the Department of Justice and Community Safety's (DJCS) <u>privacy policy</u>. I understand and consent to the FAS collecting and disclosing my information to the relevant authorities/persons/entities.

I understand that to process my application the FAS will need to provide my personal information to other organisations or request information about me from other organisations.

This will include requesting or accessing information from Court Services Victoria (CSV) about any previous Victims of Crime Assistance Tribunal (VOCAT) applications and Victoria Police about the violent act. It may also include requesting information from other organisations and entities (including other schemes that provide damages, compensation or financial assistance) to process my application and/or sharing information with the relevant authority if you have made a complaint. It may also include providing information to the Supreme Court of Victoria if my assistance is paid to Funds in Court to be held on trust.

I have also read the Website Privacy Statement on the VOCAT website at <u>Privacy | Victims of Crime Assistance Tribunal</u> (vocat.vic.gov.au). I have also read the Website Privacy Statement appearing on the website operated by CSV at <u>Privacy |</u> <u>Court Services Victoria</u>. For the purposes of progressing my application to the FAS, I consent to VOCAT and CSV disclosing my personal or health information within VOCAT and CSV, to the FAS.

Acknowledgement of collection notice and privacy policy for Authorised Representatives submitting an application on the applicant's behalf – Consent to disclosure of personal and health information

I have read the <u>collection notice</u> and Department of Justice and Community Safety's (DJCS) <u>privacy policy</u>. I confirm that as an Authorised Representative for the applicant, that the applicant is aware of and has provided consent for me to provide this information to the FAS. I also confirm that the Applicant is aware of the terms of the collection notice and the DJCS privacy policy.

In particular, the applicant is aware that the FAS will collect this information and disclose their information to the relevant authorities/persons/entities as set out in the collection notice and the DJCS privacy policy.

The applicant is aware that to process their application the FAS will need to provide their personal information to other organisations or request information about them from other organisations. This will include requesting or accessing information from Court Services Victoria about any previous VOCAT applications and Victoria Police about the violent act. It may also include requesting information from other organisations and entities (including other schemes that provide damages, compensation or financial assistance) to process their application and/or sharing information with the relevant authority if they make a complaint. It may also include providing information to the Supreme Court of Victoria if their assistance is paid to Funds in Court to be held on trust.

I have also read the Website Privacy Statement on the VOCAT website at <u>Privacy | Victims of Crime Assistance Tribunal</u> (vocat.vic.gov.au). I have also read the Website Privacy Statement appearing on the website operated by CSV at <u>Privacy | Court Services Victoria</u>. I confirm that as an Authorised Representative for the applicant, that the applicant is aware of and has provided consent to VOCAT and CSV disclosing their personal or health information within VOCAT and CSV to the FAS. The Applicant has authorised me to give this consent. I also confirm that the Applicant is aware of the terms of the VOCAT and CSV Website Privacy Statements and the terms of this acknowledgment.

49 I confirm that I have read and agree to the terms above

Full name of applicant or Authorised Representative

Date	
Signed	

Part M: Supporting document requirements

Overview

Throughout the application form, the **U** symbol indicates where supporting documents are required. This section explains what documents are required for each Part of the application form.

The symbol indicates where evidence of the cost or expense is required. For expenses you have already incurred, you must provide an invoice or receipt. For future expenses, you must provide a quote or other official evidence of the product cost or service provider's fees. All expense documents must include:

- an itemisation of the cost
- ABN of the service provider
- Business name and contact information
- · Business payment details (BSB, account number).

Please only attach **copies** of documents to your application. The FAS cannot return original documents to you.

The sections below specify what documents are required for specific questions throughout the application form. If a particular question does not apply to you, you do not need to provide that piece of evidence.

Q11: Please provide a report from an accredited mental health social worker, counsellor, registered psychologist or psychiatrist that explains the need for more than 20 counselling sessions.

Please ensure the document includes:

- · details of the proposed treatment
- · the cost of the treatment
- the practitioner's opinion on the need for the additional sessions
- the practitioner's opinion as to whether the need is directly a result of the incident.

Q16: Please provide a medical report, record, letter or evidence of diagnosis that shows (further) medical treatment is needed as a result of the incident.

Please ensure this document includes:

- details of the proposed treatment(s)
- the practitioner's opinion on how the proposed treatment would help recovery
- that the need for the treatment is directly a result of the incident.

Q20: Please show you have permission to make these modifications to the property.

If you own your home, please provide one of the following:

- Certificate of Title
- Contract of sale
- Home insurance documentation

- Mortgage documents
- Rates notice.

If you are renting or living in a home owned by somebody else, please provide one of the following:

- Lease agreement that shows permission to make modifications to the property
- · Letter from the property manager or real estate agent
- Letter from the private landlord or family member that owns the property, together with their proof of ownership.

Q23 & Q25: Please provide a report or letter from a medical or mental health practitioner that shows your (continued) inability to work.

The medical or mental health professional supplying the document must be currently registered by the Australian Health Practitioner Regulation Agency (AHPRA).

Please ensure the document details your:

- injury and their diagnosis
- (continued) inability to work and the duration of this inability.

Q26: Please provide a document that confirms your earnings.

If you have consistent income, you must provide one of the following as evidence of your prior earnings:

- income protection documents
- bank statements
- payslips

• Australian Tax Office (ATO) records for the 3 financial years prior to the violent act and, when possible, until the end date of the loss of earnings period

• employment contract.

If you have inconsistent income (for example if you are selfemployed or you have irregular casual employment) you must provide ATO records for the 3 financial years before the violent act, and when possible, the financial years between the date of the violent act and the end of the loss of earnings period.

You can also provide additional documents to support your loss of earnings. This could include:

• a letter from your employer detailing your past and/or current earnings

- · a statutory declaration about past and/or current earnings
- any other documentation relevant to your loss of earnings request.

Supporting document requirements cont.

Q27: Please provide a document that shows your income entitlements.

Please ensure the document includes the following:

- · how much you were/will be paid
- when you were/will be paid.

Q29: Please provide a document that shows you were wearing the clothing at the time of the incident.

To seek payment for loss or damage to clothing, you must provide evidence to show that the clothing detailed above was lost or damaged while being worn at the time of the violent act.

This could include:

- police reports or statements confirming the clothing worn at the time of the violent act
- · photos from the time of the violent act
- statutory declaration detailing the clothing worn at the time of the violent act.

Q34: Please provide a supporting document that shows how the proposed expense(s) will aid your recovery from the incident.

To support your request, it is recommended that you provide a report or letter from one of the following:

- mental health practitioner
- medical practitioner
- social worker
- other support worker.
- The document must detail the following:
- · details of the proposed treatment, therapy or expense
- the practitioner's opinion as to how it will assist your recovery from the violent act.

Q37: Please provide a document(s) that supports your change of circumstances.

You should provide a document that shows your change of circumstances and how this applies to your eligibility for special financial assistance.

Q39: Please provide a document(s) that shows you relied upon money from your loved one and expected to continually receive the money.

You must provide a document that shows you expected to receive the money from your loved one within 2 years of their passing.

This document could be a bank statement, statutory declaration or any other document.

Q42: Please provide a document(s) that supports your change of needs or circumstances.

You should provide a document that shows your change of needs or circumstances and how this applies to your eligibility for a distress payment.

<u>Q45: Please provide a supporting document that shows</u> your relationship with your loved one.

Applicants who are a <u>close family member</u> are recommended to provide one or more of the following documents to show their relationship to the primary victim:

- birth or adoption certificate
- guardianship documentation
- foster care documentation
- letter from a local Aboriginal community-controlled organisation
- marriage or relationship registration certificates
- government document showing the relationship (such as Medicare or Centrelink).

Applicants who are a <u>dependant</u> are recommended to provide one or more of the following documents showing their financial dependency and relationship with the primary victim:

- documents showing payments or other benefits provided by the primary victim to the applicant
- documents showing financial dependency through shared accounts, addresses or details (such as bank statements, utility bills, rental agreements, home ownership documents)
- details of beneficiaries (superannuation beneficiaries etc) showing financial dependency of the applicant.

Applicants who were in an <u>intimate personal relationship</u> are recommended to provide documentary evidence demonstrating the nature of their relationship with the primary victim. This could include the following:

- documents showing shared expenses or financial responsibilities such as accounts, addresses or details (bank statements, utility bills, rental agreements, home ownership documents)
- letter from a local Aboriginal community-controlled organisation
- documents showing a mutual commitment to a shared life.

You can also provide additional documents to show your relationship including statutory declarations from yourself or others about the nature of your relationship with your loved one.