

Receiving provider declaration

l,	[insert full na	ame of person signing the declaration],	
of	[insert address],		
am[insert position/title of	applicant, e.g propritetor, director, etc.	
and I am			
the approved provider of the service, or		Note: please tick one box only	
a person authorised to sign on approved provider's behalf	the		

I declare that:

- 1. The information provided in this form (including any attachments) is true, complete and correct
- 2. I have read, understood and agree to the conditions and the associated material contained in this form
- 3. I understand that the Regulatory Authority has the right (but are not obliged) to act in reliance upon the contents of this form, including its attachments
- 4. I have read and understood a provider's legal obligations under the Education and Care Services National Law
- 5. The Regulatory Authority is authorised to verify any information provided in this form
- 6. Some of the information provided in this form may be disclosed to the Commonwealth for the purposes of the Family Assistance Law and may be disclosed to other persons/authorities where authorised by the Education and Care Services National Law or other legislation, and
- 7. I am aware that under the Education and Care Services National Law penalties apply if false or misleading information is provided.

Signature of the person making the declaration: _		
Signed at:	[address] on	[date]

Who may sign?

- Individuals: the individual applicant/notifier
- Company: two directors of the company, or a director and company secretary, or if a sole proprietor, the sole director
- Incorporated association: the public officer and one other member of the management committee
- Cooperative: two directors of the cooperative, or a direct and one other officer of the cooperative
- Partnership: a managing partner who is authorised to sign on behalf of the partnership
- Corporation: signed in a accordance with the rules of the corporation
- Government school council: signed in accordance with the rules of the council.

