

CSNSW Victims Register

Application Form



Instructions

Please complete the below application form to register with us. You can print the form or complete it electronically.

Please provide as much detail as you can and ensure you complete all mandatory questions. Fields marked with a * are mandatory. Remember to provide all necessary supporting documents.

You can submit your form via:

Email: victims.register@correctiveservices.nsw.gov.au

Post: CSNSW Victims Register & Restorative Justice Unit
Locked Bag 5111, Parramatta NSW 2124

The Victims Register will
treat your information
confidentially.

The Victims Register will
not let offenders know
that you are registered
against them.

If you have any questions or need help to complete the form, please contact us on our email address above or call us on 02 8688 0555.

Section 1: Eligibility

1. Is the offender sentenced? (required)*

Sentenced means that a court decided an offender is guilty and they are serving time for the crime. To be eligible to apply the offender must be serving a NSW custodial sentence:

- in prison
- on parole
- on an Intensive Corrections Order due to a personal violence offence
- on a Supervision or Detention Order issued by the Supreme Court

Please indicate if the offender is subject to one of the above:

Yes (*go to Question 2*)

No - you may not be eligible to register at this time.

Please submit your application after sentencing. If you have concerns about your safety or bail please contact the NSW Police officer in charge of your matter or your local police station.

If you are uncertain, please contact the NSW Police Officer in charge of your matter to confirm. Alternatively, you can contact us on (02) 8688 0555 to discuss your situation.

2. Please describe yourself (required)*

I am 18 years of age or over and:

I am a direct victim (*go to Section 2*)

I am a family representative of a deceased victim or primary caregiver of an underage victim (*go to Question 3*)

I am a guardian of an adult victim who has a legal incapacity (*go to Question 3*)

I can prove my safety is endangered due to my connection to the offender (*go to Question 4*)



Alternatively, you can contact us on (02) 8688 0555 to discuss your situation. If more than one family representative would like to register, each person will need to submit a separate application.

3. Victim details (required)* (for family representatives and guardians only)

Full name	Date of birth	Your relationship to the victim
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Please provide one of the following supporting documents demonstrating your relationship to each victim.

Please select which evidence you provided:

Australian birth certificate

Power of Attorney

Marriage certificate

Medicare card

Guardianship order showing legal function on behalf of a victim

Letter from medical practitioner stating the victim has a legal incapacity and requires a primary caregiver

Other

4. Other applicant with demonstrated safety concerns (required)*

If you believe your life or safety is at risk due to your connection to the offender, we encourage you to include evidence to support your application. Providing as much detail as possible will help us assess your application.

Examples of evidence include:

Apprehended Violence Order (current or expired)

Apprehended Domestic Violence Order (current or expired)

Evidence of applicant being witness in court proceedings related to the offence

Proof of ongoing threats by the offender to the applicant

Other supporting documentation (specify below)



If you are uncertain whether you can apply, or have any questions about the Victims Register, please do not hesitate to contact us on victims.register@correctiveservices.nsw.gov.au or via phone on (02) 8688 0555.

Section 2: Applicant's details

1. Personal details (required)*

Title	Date of birth	Gender (optional)
Surname / family name		
Given name(s)		
Previous given names		
Previous surname/ family name		

2. Contact details (required)*

Postal address

Preferred contact number

Secondary contact number (optional)

Email address

3. Background (optional)

Ancestry/Cultural background?

Do you identify as Yes No
Aboriginal or Torres
Strait Islander?

4. Additional assistance (required)*

Interpreter required? Yes No

Please specify
language/dialect

Will you need help Yes No
to understand the
information we
give you?

Please specify what
help you need or if you
have a disability so we
can tailor our support
accordingly (optional)

Section 3: Offence and offender details (required)*

Required fields are marked below. Please provide as much information as you can to assist us processing your application.

Offender name(s) (required)*

Nature of offence(s) (required)*

Offence date	Location
Event number	Investigating officer
Court case number	Sentencing / Court date
Court location	

Section 4: Contact

1. What is your preferred method of contact? (required)*

- Phone To help us reach you at a convenient time, could you please let us know your general availability?
(Our business hours are Mon-Fri 9am-5pm)
When we call you from the Victims Register, our number may appear as an unknown or private number.
- Email We will contact you on your provided email address.
Please monitor your junk inbox to ensure no communication from us is missed
- Post We will contact you via your provided postal address.
Please note if you live internationally, we will provide information via email.

2. Alternate contact (optional)

You can provide an alternate adult contact, who we may leave a message with if we cannot reach you. We will not disclose detailed information to this person.

Please complete all fields below if you would like to provide an alternate contact:

Surname/ Family name

Given names

Relationship to you

Contact number

Email

Remember to let your alternate contact know you have shared their contact information with the CSNSW Victims Register.

3. Courtesy call on registration (optional)

If we have all the required information, we will process your registration and send you information via your preferred method of contact. Alternatively, we can call you to confirm your registration. Please tick the box below if you would like a courtesy call on completion of your registration.

- Yes To help us reach you at a convenient time, could you please let us know your general availability?
Our business hours are Mon-Fri 9am-5pm)
Please be aware that when we call you from the Victims Register, our number may appear as an unknown or private number.

Section 5: How did you hear about our service? (required)*

- | | | |
|---|-----------------------|-------------------------|
| Corrective Services NSW | NSW Police | Court |
| Victim Services NSW | Victim Support Group | Other Victims Registers |
| Welfare Service | Psychological Service | |
| Medical Service | Legal Service | |
| DPP-Office of the Director of Public Prosecutions (Commonwealth or NSW) | | |
| Other (Please specify): | | |

Section 6: Proof of identity (required)*

We cannot process your application without proof of your identity. Please provide a copy of one of the following photographic identification documents:

- Driver's licence
- Australian proof of age card
- Passport

Section 7: Declaration (required)*

I understand that if my application is approved:

- My information will be recorded on the Victims Register for the duration of the offender's sentence.
- My personal information will be collected, used, and retained by Corrective Services NSW so I can be included on the Victims Register and will be disclosed to other government agencies to verify my details and eligibility and manage my registration.
- After the sentence expires, my details will be maintained if the offence becomes eligible under the Crimes (High Risk Offenders) Act 2006 and the Terrorism (High Risk Offenders) Act 2017.
- My registration is voluntary, and I can notify the Victims Register if I no longer wish to be registered.
- Information from the Victims Register is confidential; I will not disclose it publicly without Corrective Services NSW' approval, including on social media or with public messaging agencies.
- If I am the primary caregiver of the direct victim, my registration continues when they turn 18. The direct victim can also register when they are old enough.
- I cannot use the information for purposes other than those for which it was provided.
- I understand that the type of information that Corrective Services NSW may provide me is restricted by law.

I consent to the collection, use, disclosure, and retention of my personal information so that I can be included on the victims register and supplied with information.

I consent to my personal information being shared with other Victims Registers including the NSW Specialist Victims Register, the NSW Youth Justice Victims Register or Victims Registers in other Australian States or Territories, for the purpose of registration if required.

I declare that my alternate contact consents for the Victim's Register to contact them if they cannot reach me.

I confirm that I have read and understood the information in this form and that all the information I provided is true and correct.

Signature (required)*

Date (required)*

Section 8: Documentation checklist

Information about an offender's status is confidential. Your application must be accompanied by proof of identity and, if applicable, the supporting documentation requested.

Please do not send original documents. Copies do not need to be certified by a Justice of the Peace. We may contact you for more information.

All applicants – one photographic form of ID

Driver's licence

Australian proof of age card

Passport

Primary caregivers or family representatives – One of the following forms of documentation

Australian birth certificate

Power of Attorney

Marriage certificate

Medicare card

Guardianship order showing legal function on behalf of a victim

Letter from medical practitioner stating the victim has a legal incapacity and requires a primary caregiver

Other applicants with demonstrated safety concerns – Examples of evidence include:

Apprehended Violence Order (current or expired)

Apprehended Domestic Violence Order (current or expired)

Evidence of applicant being witness in court proceedings related to the Offence

Proof of ongoing threats by the offender to the applicant

Other forms of evidence are acceptable, please provide as much evidence as possible to support your application

Please note if you have any difficulties providing the required forms of evidence, please do not hesitate to contact us via email at:

victims.register@correctiveservices.nsw.gov.au

or via phone on: (02) 8688 0555 to discuss your situation