

CONFIRMATION OF ABORIGINAL AND/OR TORRES STRAIT ISLANDER DESCENT

I, _____
(Given names) (Surname)

Born on: _____ at: _____
(Date) (Location)

Now living at: _____

Declare that I am of Aboriginal/Torres Strait Islander descent.

Mother's Name: _____

Father's Name: _____

My language group and/or home community are: _____

Applicant's Signature: _____ Date: _____

APPROVAL BY INCORPORATED ABORIGINAL AND/OR TORRES STRAIT ISLANDER ORGANISATION

The above person is accepted and recognised as an Aboriginal and/or Torres Strait Islander person by the Board of Management of this incorporated organisation or association.

Name of Organisation: Arabana Aboriginal Corporation RNTBC

Address of Organisation: c/- Camatta Lempens
Level 1/345 King William Street
Adelaide SA 5000

Moved by: _____ Position: _____

Signature: _____

Second by: _____ Position: _____

Signature: _____

Date of Board Meeting: _____ Agenda Item: _____
(Signatories must not be members of the applicant's family)

Common Seal of Confirming Body