

Guideline:

Direct Registration (Intensive Stream Only)

This Guideline outlines how ParentsNext Providers delivering services in an Intensive Stream Location, can identify whether a person is eligible to participate in ParentsNext as an Intensive Stream Volunteer. If the parent is eligible, Providers can perform a Direct Registration for ParentsNext. Parents may Directly Register with a Provider to participate in ParentsNext as an Intensive Stream Volunteer, without going to the Department of Human Services.

The Department of Human Services can also identify eligible parents and refer Intensive Stream Volunteers to Providers.

Version: 1.0

Published on: 25 June 2018

Effective from: 1 July 2018

Related documents and references

- [Assistance to Participants Guideline](#)
- [Eligibility, Referrals, Commencement and Caseload Guideline](#)
- [Job Seeker Classification Instrument \(JSCI\) Assessment](#)
- [Transfer and Exits Guideline](#)
- [Privacy Guideline](#)
- [Australian Government Guidelines on the Recognition of Sex and Gender](#)

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Providers must check if a person is eligible for Direct Registration

ParentsNext Direct Registration Form

The ParentsNext Direct Registration Form (available at the end of this Guideline and Provider Portal) assists the Provider to determine if a parent is eligible for Direct Registration as an Intensive Stream Volunteer.

The form explains how the Provider collects, uses and holds the parent's personal information. By completing the form, the parent gives consent for their personal information to be used in this way.



Documentary evidence: The Provider must keep a copy of the completed ParentsNext Direct Registration Form.

(Deed Reference: Annexure A1 – Definitions; Clause 102)

Eligibility check

To be an Intensive Stream Volunteer, the parent must:

- be receiving Parenting Payment
- have a youngest child aged under six
- reside in an Intensive Stream Location
- not be a current a ParentsNext Compulsory Participant.

If the parent is not eligible, the Provider must not proceed with the Direct Registration.

Refer to the Eligibility, Referrals, Commencement and Caseload Guideline.



System step: The Provider must enter the information from the Direct Registration Form into the Department's IT Systems, after determining the person's eligibility for Direct Registration.

(Deed reference: Annexure A1 – Definitions; Clause 102)

Verifying a person's identity

The Provider must confirm the person's identity as part of the Direct Registration process. The Direct Registration Form provides a list of acceptable forms of proof of identity.

If the person has genuine difficulty providing the documents listed in the Direct Registration Form for proof of identity checks, other documents that contain both the person's name and address (postal or residential) may be used (for example, rates notices or phone bills).

The Provider should consider referring the person to the Department of Human Services for assistance if they can't provide any evidence of their identity.



Documentary evidence: The Provider is not required to keep a copy of this proof of identity but must record on the Direct Registration Form that they have sighted the documentation specified in the ParentsNext Direct Registration Form.

Note: Proof of identity checks involving the Provider sighting a person's photographic identity must occur in person.

(Deed reference: Annexure A1 – Definitions; Clause 102)

Is the person already registered?



System step: The Provider must conduct a Registration search in the Department's IT Systems as part of the Direct Registration process, to determine whether the person has an existing Registration that may contain relevant information, such as a Job Seeker Identification (JSID) number.

Registration search

The outcome of the Registration search in the Department's IT Systems determines the Provider's next action. Where the person has:

- *no Registration*—the Provider must create a new record for the person
- *an inactive Registration*—the Provider must re-register the person
- *a current Registration with another Provider and wishes to transfer* – the Provider must organise a Transfer by Agreement with the current Provider for the Participant (refer to Transfers and Exits Guideline)
- *a current Registration with the Provider.*



System step: If a parent does not have a CRN linked to their record in the Department's IT Systems, Providers must navigate to the Registration screen in the Department's IT Systems and link the parent's CRN to their JSID to enable the Department of Human Services to confirm/reject a parent's eligibility as an Intensive Stream Volunteer.

Once eligibility is confirmed by the Department of Humans Services, and the Provider records that a Participant has attended an Initial Appointment in the Department's IT Systems, the Participant will Commence in ParentsNext.

(Deed reference: Annexure A1 – Definitions; Clause 102)

Ineligible as an Intensive Stream Volunteer

If the Department of Human Services information returned to the Department's IT Systems indicates the parent is ineligible for ParentsNext, they will be Exited. If the parent believes they do meet the eligibility criteria for an Intensive Stream Volunteer, the Provider should advise the parent to contact the Department of Human Services and check their personal details are up to date.

For example, if the parent has relocated recently, their address may not have been changed to indicate they now reside in a ParentsNext Intensive Stream Location. If the Department of Human Services finds the parents is eligible for ParentsNext as an Intensive Stream Volunteer after updating their personal details, the parent can be referred back to the ParentsNext Provider for an Initial Appointment.

(Deed reference: Clause 102)

Summary of required documentary evidence



Documentary evidence: The Provider must keep a copy of the completed, signed and dated Direct Registration Form. This form contains a range of personal information used to determine a person's eligibility for Direct Registration.

All capitalised terms in this guideline have the same meaning as in the ParentsNext Deed 2018–2021 (the Deed). In this Guideline, references to Provider mean a ParentsNext Provider (unless otherwise specified). This Guideline is not a stand-alone document and does not contain the entirety of ParentsNext Providers' obligations. It must be read in conjunction with the Deed and any relevant Guidelines or reference material issued by Department of Jobs and Small Business under or in connection with the Deed.



ParentsNext Direct Registration Form

ParentsNext Eligibility Check

Please confirm that:

- You are receiving Parenting Payment.
- Your youngest child is five years of age or younger.

Your ParentsNext Provider will need to confirm you reside in an Intensive Stream Location.

Privacy and your personal information

Your personal information is protected by law, including the *Privacy Act 1988* (Cth) and the Australian Privacy Principles. Your ParentsNext Provider collects the personal information you provide in this form on behalf of the Australian Government Department of Jobs and Small Business (the Department) to:

- work out whether you are eligible for ParentsNext
- register you with a ParentsNext Provider
- deliver ParentsNext services to you and help you plan and prepare for future employment
- help in evaluating and monitoring the programs and the services provided to you by the Department's contracted Providers
- help to resolve complaints you or your ParentsNext Provider may make
- include you in surveys conducted by the Department or on behalf of the Department.

If you do not provide some or all of your personal information, the Department cannot ensure you are provided with the most suitable level of employment assistance.

You can ask for assistance from your ParentsNext Provider to complete this form if required. You may also have a nominee, including a family member, advocate, social worker or counsellor, with you for support when filling out this form.

Your personal information may be passed on to and between the Department's contracted Providers, and

to agencies involved in administering employment services and income support payments and services. This may include the Department of Human Services, the Department of Education and Training, the Department of Home Affairs, the Department of Social Services, the Australian Taxation Office and the Department of the Prime Minister and Cabinet and their respective contracted providers who are delivering services to you. Your personal information may also be shared with third parties, such as activity hosts and employers, as part of delivering employment services to you.

Where appropriate to do so, this information may also be shared with and between these and other organisations (including contracted service providers) in the course of providing you with employment services and assistance and when evaluating and monitoring those services and assistance.

Please note your sensitive personal information may also be used by the Department or given to other parties where you have agreed, or where the Department is otherwise permitted. This may include where it is required or authorised by, or under, an Australian law, such as social security law, a court or tribunal order, or where a duty of care exists.

The Department's Privacy Policy has more information about how we will manage your personal information, including how you may access your personal information and ask for corrections. The Privacy Policy also explains how you can complain about a breach of the Australian Privacy Principles and how the Department will deal with such a complaint. The Department's Privacy Policy is available from www.jobs.gov.au/privacy or you can ask for a copy via email: privacy@jobs.gov.au.

Participant identification details

If you know it, please provide your Department of Human Services Customer Reference Number.

You can find this information on any letter the Department of Human Services has sent you, or on your Department of Human Services Health Care Card or Concession Card.

Department of Human Services Customer Reference Number

Are you already registered with:

- a Disability Employment Services provider
- an Australian Disability Enterprise
- a Community Development Programme provider
- a Harvest Labour Services provider
- New Enterprise Incentive Scheme provider
- Transition to Work, or
- a jobactive provider?

Yes No

If **yes**, please provide your Job Seeker Identification Number

Job Seeker Identification Number

1. Your personal details

Title

Family name

First name(s)

Preferred name

Date of birth

Gender

Male Female X(Indeterminate/ Intersex/Unspecified)

Country of birth

Is English your first language?

Yes No

Do you require access to an interpreter?

Yes No

If **yes**, what language?

2. Are you or have you been known by any other names?

For example, a maiden name, previous married name, Indigenous or community name.

Yes No

Other name(s)

3. Your contact details

Postal address

Number and street/PO Box

Suburb or town

State or territory

Postcode

Residential address (if different from postal address)

Number and street

Suburb or town

State or territory

Postcode

Other contact details

Best contact method

Home telephone number

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Work telephone number

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Mobile telephone number

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Fax number

--	--

Email address

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4. Personal circumstances

a. Are you an Australian citizen or permanent resident?

Yes No

If **yes**, go to 5c.

b. Are you a visa holder?

Yes No

Does your visa include the right to work?

Yes No

What is the end date of your visa?

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c. Do you have a child aged five years or under?

Yes No

d. How many children do you have?

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e. Have you been in paid employment in the last six months?

Yes No

5. Proof of identity

You must provide the documentation specified in either Group A or Group B (detailed below).

You must show these documents to your Provider.

Group A

You must provide **one** of the following:

- Drivers licence number

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- Current Australian passport number

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- Other form of photo identification from a government department or agency

Please specify type of identification

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Identification number

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Group B

You must provide **two** of the following:

- Financial institution (bank) documents¹ including

ATM/credit cards showing name and signature

Bank statement showing your name and address

Motor vehicle registration papers with current address

¹ We do not record or copy identification or account numbers.

- Other documents—any of the following documents

Birth certificate or birth certificate extract

Certificate of Australian citizenship

Motor vehicle registration papers with current address

Australian marriage certificate

Documents showing registration of a change of name

Divorce papers

Trade certificate

Insurance renewal documents showing current address

Medicare card

Other (please specify)

If you cannot provide information in either Group A or Group B, talk to your Provider about what other forms for documentation are sufficient to prove your identity.

For example, you could use documents that show your name and address (postal or residential) to confirm your identity. This could include rates notices, mobile phone or other bills.

You may also use other forms of documentation that contain your name, such as letters of reference, payslips from previous employment, library and other club memberships or education certificates.

If you do not have sufficient documentation, the Department of Human Services may be able to assist.

Details of documentation shown to your Provider:

Declaration by Participant:

By signing this form, I confirm that:

- I have read and understood the completed form, and the information I provided is complete and true to the best of my knowledge.
- I have read, understood and agree to the collection, use and disclosure of my personal information as outlined on the first page of this form and in the Department’s Privacy Policy.
- I understand that if I am currently participating in jobactive, Disability Employment Services or Transition to Work, I will be exited from these services on commencement in ParentsNext.
- I understand what services I can receive, including what help I can access to find a job and examples of activities that I may take part in.
- I understand my personal information may be provided to Department’s contracted Providers, who may view and use this information for the purposes of registering me for, and delivering, programs and services.
- I understand my information may also be transferred between the Department, ParentsNext Providers, other service providers, and the Department of Human Services, for the purposes of delivering services.
- My Provider has explained the Service Guarantee and their Service Delivery Plan to me (if applicable).

Additional declaration by legal guardian or administrator of Participant (if applicable): ²

I have been appointed the legal guardian or administrator of the Participant and as such, I am authorised to sign this declaration for, and on behalf of, the Participant (please tick box).

Yes

Signed: _____

Date: _____

Printed name: _____

² Note: Where the Participant has appointed a guardian or administrator, the guardian or administrator should sign the declaration.

Declaration by ParentsNext Provider:

By signing below, I confirm that:

- I have established that the Participant meets the eligibility criteria for this program.
- I have encouraged the Participant to provide as much relevant information as possible during the registration process, so they can receive the help that best meets their needs.
- I have sighted documents establishing the Participant’s proof of identity.
- The information about the Participant, as entered on this form and in the Department’s IT Systems, is true and correct to the best of my knowledge.
- I have fully informed the Participant about what services they can receive, and made them aware of their rights as well as the obligations of ParentsNext Providers.
- I have checked that all relevant questions in this form have been answered.

Signed: _____

Date: _____

Printed name: _____

Organisation _____

Location/Site _____