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# Appendix 2

## Recognising Organisation Resolution

|  |  |  |  |
| --- | --- | --- | --- |
| (Note: this form must be read together with the Department of Education’s [Confirmation of Aboriginality Factsheet](https://edit.education.nsw.gov.au/content/dam/main-education/about-us/careers-at-education/aboriginal-peoples/Confirmation-of-Aboriginality-Factsheet.pdf) | | | |
| Name of applicant/employee\*: |  | | |
|  | | | |
| Address of applicant/employee\*: |  | | |
|  | | | |
| It is hereby confirmed that the above named applicant/employee\*, seeking assistance or employment from the NSW Department of Education, has provided sufficient evidence to indicate they are an Aboriginal person, defined as: | | | |
| (a) \*a member of the Aboriginal race of Australia, meaning that one or both of their parents are Aboriginal; and | | | |
| (b) \*identifies as an Aboriginal person; and | | | |
| (c) \* is recognised as such by the # | |  |  |
| Community in which the applicant currently lives and has lived for years; | | | |
| \* is recognised as such by the # | |  |  |
| Community in which the applicant formerly lived for years; | | | |
| \* is recognised as such by the # | |  |  |
| Community, which is the \*applicant’s traditional area or \*area where the applicant’s family has lived for years; | | | |
| *(\* Delete whichever is not applicable). (# Insert name of Community).* | | | |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| (Organisations’ Common Seal to be affixed) | | Resolution Number |  | Date of Meeting | *\_\_\_ / \_\_\_ / \_\_\_* |
| Signature: |  | | | | Authorised Signatory |
| Signature: |  | | | | Authorised Signatory |