



VICTORIA POLICE

VOLUNTARY DISCLOSURE FORM

PERSONAL DETAILS:

Police

PSO

Surname / Family Name:	Given Names:	Date of Birth:
Any previous Surname/s:	Previous Given Names / Alias:	Home Address:
Gender:	Driver's Licence Number:	State:
Man: Woman:		
Email address:	Mobile Phone Number :	Occupation:

DRIVING CHARGES / COURT MATTERS / POLICE INVOLVEMENT		
Details / Date / Location:	Offence Type / Penalty:	Circumstances / Explanation:

ADDITIONAL DETAILS:

Please add any other details you feel may assist in your assessment such as:

- Bankruptcy (Voluntary or otherwise)
- Payment plans
- Outstanding fines
- Intervention Order(s)

NAME:

DATE:

Please save this form to your desktop prior to emailing as an attachment to:
recruitment-vdf-mgr@police.vic.gov.au

Recruiting Services Branch Triage - (Office Use Only)