



VICTORIA POLICE

VOLUNTARY DISCLOSURE FORM

Please complete the VDF by typing into the text boxes provided, hand written responses **WILL NOT** be accepted.

Do you have a current application: No Yes App ID: (If applicable) Police PSO PCO

PERSONAL DETAILS: Gender: Man Woman Self Described

Surname / Family Name: Given Names: Date of Birth:

Any previous Surname/s: Previous Given Names / Alias:

Home Address: Suburb State:

Driver's Licence Number: State of Issue:

Email address: Mobile Phone Number : Occupation:

DRIVING CHARGES / COURT MATTERS / POLICE INVOLVEMENT

Details / Date / Location:	Offence Type / Penalty: (If applicable)	Circumstances / Explanation:

ADDITIONAL DETAILS:

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

- Bankruptcy (Voluntary or otherwise)
- Illicit drug use
(disclose full details including type of drug used, circumstances of use, frequency of use and date of last use)
- 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)