Notification of potential disclosure under the [*Public Interest Disclosure Act 2013*](https://www.legislation.gov.au/Details/C2023C00211)

This form can be used to assist a public official who is seeking to make a public interest disclosure (PID). However, please note it is not compulsory to use this form to make a disclosure.

Once you have completed the form, you can:

* Email it directly to an authorised officer of the department (a list of the department’s authorised officers can be found on the [internet](https://www.health.gov.au/sites/default/files/2023-06/public-interest-disclosure-scheme-department-of-health-authorised-officers.pdf), with a subject line ‘**Confidential – For the Attention of (insert name of authorised officer)**, authorised officer’;
* Send it directly to an authorised officer at **GPO Box 9848, Canberra ACT 2601**, with any envelopes or external covers marked ‘**Confidential – For the Attention of (insert name of authorised officer)**, authorised officer’;
* Provide it to your supervisor who can pass it on to an authorised officer of the department; or
* Email it to the PID Management unit at [PID@health.gov.au](file:///C%3A%5CUsers%5CBakelu%5CAppData%5CLocal%5CMicrosoft%5CWindows%5CINetCache%5CContent.Outlook%5C6H2D7DQA%5CPID%40health.gov.au), with the subject line ‘**Confidential – For the Attention of (insert name of authorised officer)**, authorised officer’, and PID Management will forward the email to the most appropriate authorised officer.

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| 1. Your details
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| *You do not have to provide your name and contact details to make a disclosure.*  |
| **Your Full Name** |  |
| **Phone Number** |  |
| **Email Address** |  |
| If you have provided your name and/or contact details, do you consent to these details being provided to the principal officer of the department (or their delegate) in the event that the disclosure is allocated to the department? | Choose an item. |
| If you have provided your name and/or contact details, do you consent to provide your name and contact details to the Commonwealth Ombudsman, or other intelligence agencies (if appropriate).  | Choose an item. |
| If you have provided your name and/or contact details, do you agree to receive correspondence from the Ombudsman’s office (for example, notification of extension decisions)? If so, please advise of any sensitivities or specific communication requirements.  | Choose an item. |
| **Are you, or have you ever been, employed or engaged by the department?** | Choose an item. |
| **If no, or have you ever been, employed or engaged by the Commonwealth?**Please provide details. | Choose an item. |
| **If no, have you been a contracted service provider for a Commonwealth contract, or an officer or employee of a contracted service provider for a Commonwealth contract?** Please provide details.  | Choose an item. |
| 1. Alleged disclosable conduct
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| **Please provide details of the following matters (attach a separate document if necessary):*** **The conduct you believe amounts to disclosable conduct;**
* **When and where the conduct occurred;**
* **Who was involved in the conduct; and**
* **Any relevant background information.**
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| **What form of disclosable conduct do you consider has been engaged in?**(See section 29 of the PID Act) | Choose an item.Choose an item.Choose an item.Choose an item.Choose an item.Choose an item. |
| **Do you consider any corrupt conduct has been engaged in?**(See section 8 of the National Anti-Corruption Commission Act)**If yes, please describe the nature of the corrupt conduct in more detail, including whether:*** **A current or former staff member or contractor to the department has been involved, and**
* **You consider the corrupt conduct to be serious or systemic.**
 | Choose an item. |
| **Is anyone else aware of the conduct described above?** **If yes, please provide their details.** | Choose an item. |
| **Has any action been taken in relation to the conduct above?****If yes, please provide details of that action.**  |  |
| **Has this conduct previously been, or is it currently being investigated?****This includes under the PID Act, Code Investigation or other Commonwealth law.****If yes, please provide details of that investigation.**  |  |
| **Do you have anything further you would like to add?** |  |

*If you have any supporting correspondence or documentation, please provide these details at the time of making your disclosure (i.e., as attachments to your correspondence to the authorised officer).*