Community Support Program

Basic Supporter Details

Full name: Family name [_____] Given Name(s) [_____]

Address:

[_____]

Phone Number: [_____]

Citizenship status:

☐ Australian Citizen ☐ Permanent Resident ☐ Other please specify [_____]

Are you a member of a group or organisation who wishes to Support a Humanitarian Applicant(s) under the Community Support Program?

☐ Yes ☐ No

If yes, please provide details about your group or organisation (eg: community group, business etc):

[_____]

Are you and/or your group/organisation willing to offer employment pathways to Humanitarian Visa Applicant(s) under the Community Support Program?

☐ Yes ☐ No

If yes, please provide details about the type of employment you wish to offer:

[_____]

Basic Applicant Details

Do you and/or your group have a specific Humanitarian Applicant(s) whom you wish to sponsor as part of the Community Support Program?

☐ Yes ☐ No

If yes, what is your relation to the Principal Humanitarian Applicant?

[_____]

If applicable, please provide the following information about the Principal Humanitarian Applicant you wish to support:

Full name: Family name [_____] Given Name(s) [_____]

Date of birth: [_____]

Total family size (including the Principal Humanitarian Applicant) [_____]

Information about the Principal Humanitarian Applicant (continued)

Nationality (if stateless, please list country of habitual residence):

Country of current residence:

Legal status in country of current residence (eg: asylum seeker, refugee, etc):

Ethnicity:

Religion:

Languages spoken/written:

Is an interpreter required?

☐ Yes ☐ No   If Yes, which language?

Contact details of Principal Humanitarian Applicant:

Email:

Phone:

Social media: Whatsapp/Viber/Skype

Is there any other relevant information you wish to share?

Please complete this form and return it to
csp@ssi.org.au