

Community Support Program

Preliminary Assessment Form for Interested **Applicants** (page 2)

Ties to Australia

Does the Principal Humanitarian Applicant have family, friends, or close community members in Australia?

☐ Yes ☐ No

If yes, please describe relationship:

Has the Principal Humanitarian Applicant identified a Supporter to sponsor his/her application to enter Australia under the Community Support Program?

☐ Yes ☐ No

If yes, please provide the following:

Supporter's name: Family name Given Name(s)

Supporter's location: (town/suburb and state)

Supporter's contact details: (phone, email, or postal address)

Is the supporter willing and able to facilitate an offer of employment or pathway to employment in Australia for the Principal Humanitarian Applicant?

☐ Yes ☐ No

Other

Do you have any other relevant information you wish to share? (e.g. refugee/protection claims)

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