



# Application for NAATI ID Card

Please complete this form and return with your payment of **\$45.00** (Australia\*) or **\$55.00** (other countries)

**NAATI Number:**  
(if known)

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## Part 1 Personal Details

**Please provide the following**

- Two recent passport photos - both endorsed and signed by a witness  
(see witness section at Part 4 of this form for further details)

**Title**

Mr  Mrs  Ms  Miss  Other  *please specify*

**Given names**

**Family name**

**Date of birth**

D	D	/	M	M	/	Y	Y	Y	Y
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**Gender** Female  Male   
(please tick  one)

**Postal address**

*For overseas residents please attach a separate address label in your language*

Suburb

State

Post/Zip code

City

Country

**Home phone**

( )

**Business phone**

( )

**Email**

## Part 2 Type of ID Card

**Select type of card**

Accreditation (valid for 3 years)

Recognition (valid for 3 years)

**THE PRODUCTION AND ISSUE OF ID CARDS TAKES APPROXIMATELY 4 WEEKS**

## Part 3 Payment Details

NAATI does not accept personal cheques (only AMO, BANK CHEQUES and OVERSEAS DRAFTS)

Amount \$AUD:

**All payments must be made in Australian dollars**

(Please tick  one)

Australian Money Order

Bank Cheque (a cheque purchased from a bank)

Overseas Bank Draft

Credit or Debit Card

Cash (payable at any NAATI office)

Card details (Please tick  one)

Visa

MasterCard

Amex

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Credit card number

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Security number if requested

M	M	/	Y	Y
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Expiry date

Card holder's name

Card holder's signature

Date

D	D	/	M	M	/	Y	Y	Y	Y
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*\*Prices include Australian Goods and Services Tax (GST) where applicable.  
Prices include postage and handling fees as applicable.  
All fees and charges are listed in Australian currency (\$AUD).  
All prices are subject to change without notice.*

Please return this form with correct payment to your nearest NAATI office or the following address

**NAATI**  
**PO Box 223**  
**Deakin West ACT 2600**  
**Australia**

National Accreditation Authority for Translators & Interpreters Ltd  
ABN 42 008 596 996

www.naati.com.au  
Valid from July 1 2009 to June 30 2010

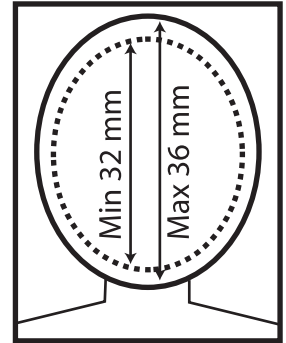
## Part 4

## Witness Declaration

**The APPLICANT must attach two recent and identical passport size photos of themselves, endorsed and signed by the witness. The WITNESS must endorse the back of the photographs and complete the declaration below.**

**Photo Criteria:**

- Two recent and identical photos 3.5 cm wide by 4.5 cm high (passport size), and in colour.
- Photos must be high quality. Low quality printed images will not be accepted.
- The witness must endorse the back of the photo by writing "This is a true photo of", the applicants name and signing.
- Photos must show head and top of shoulders close up.
- Photos must not obscure facial features with sunglasses, scarves or traditional headgear
- Photos must be no more than 6 months old.
- Attach the photos with removable adhesive tape or staple a small envelope and insert the photos.



**ATTACH PHOTOS HERE**  
DO NOT STAPLE

**Who can be a Witness** - The witness must be 18 years of age or over, must **not** be related to the applicant by birth or marriage, and must not be in a defacto relationship with the applicant. The witness must be currently employed in one of the following professional or occupational groups:

- Members of the legal profession (solicitors, judges, magistrates)
- Full-time teachers (with a minimum of 5 years employment at a school or tertiary institution)
- Public Service Employee (State or Commonwealth with a minimum of 5 years service)
- NAATI Employee who sights two pieces of photo ID (passport and driver's license )
- Accountants
- Bank Managers
- Chartered Professional Engineers
- Clerks of Courts
- Dentists
- Justices of the Peace (JP)
- Pharmacists
- Registered Nurse, Medical Practitioner or Veterinary Surgeon
- Police Officers (with a minimum of 5 years continuous service)

### Witness to complete and sign this part of the form

I, \_\_\_\_\_  
(please print your name),

have worked for \_\_\_\_\_ years at \_\_\_\_\_  
(print company name),

as \_\_\_\_\_  
(print job title)

I declare that these photos are a true representation of \_\_\_\_\_  
(print applicant's name)

You can contact me by phone on \_\_\_\_\_ or by email

at \_\_\_\_\_

Signature of Applicant:

Date   /   /

Signature of Witness:

Date   /   /

<b>OFFICE USE ONLY</b>	DATE RECEIVED:	DATE DISPATCHED:	
	CC <input type="checkbox"/> CHQ <input type="checkbox"/> AMO <input type="checkbox"/> CSH <input type="checkbox"/> DD <input type="checkbox"/> EFTPOS <input type="checkbox"/>	<b>AMOUNT PAID:</b>	
	ENTERED BY:	DATE:	
	RECEIPT NUMBER:	TRANSACTION NUMBER:	