

Australian Government

Department of Home Affairs

Appointment or withdrawal of an authorised recipient

Who should use this form?

This form should be used to notify the Department of Home Affairs (the Department) that you are:

- **appointing** an authorised recipient to receive documents that the Department would otherwise have sent to you; or
- withdrawing the appointment of your authorised recipient.

Return the completed form to the office where you lodged your application or for any other matter (eg. proposed visa cancellation), to the office of the Department that is responsible for that matter. If you are unsure which office is responsible for your matter, this form may be submitted to the nearest office of the Department.

Do not use this form if:

• you are **appointing a registered migration agent**, **Australian legal practitioner or exempt person** to provide you with immigration assistance and they will also be your authorised recipient.

In this case the registered migration agent, Australian legal practitioner or exempt person should complete form 956 *Appointment of a registered migration agent, legal practitioner or exempt person.*

Who is an exempt person?

The following people do not have to be registered as migration agents or be an Australian legal practitioner in order to provide immigration assistance:

- a close family member (spouse, child, adopted child, parent, brother or sister);
- a sponsor or nominator of a visa applicant;
- a member of parliament or their staff;
- an official whose duties include providing immigration assistance;
- a member of a diplomatic mission, consular post or international organisation.

An exempt person must not charge a fee for their service. It is an offence for an exempt person to charge a fee for providing immigration assistance and penalties of up to 10 years jail can apply.

Australian legal practitioner

Australian legal practitioner means a lawyer who holds a practising certificate (whether restricted or unrestricted) granted under a law of a State or Territory.

Authorised recipient

An authorised recipient is a person appointed to receive documents from the Department relating to matters arising under the *Migration Act 1958* (the Act) or the Migration Regulations 1994 on behalf of another person.

The most common times an authorised recipient would be appointed is during visa application processes, visa cancellation processes, sponsorship processes (including monitoring or sanctions) or ministerial intervention requests.

The Department cannot discuss matters relating to you with the authorised recipient unless they are also acting on your behalf as your registered migration agent, Australian legal practitioner or exempt person, or you have separately provided the Department with consent to disclose your personal information to them.

You may only appoint one authorised recipient at any time for a particular application or matter. The Department will send documents to the most recently appointed authorised recipient.

The Department is required under the Act to send your authorised recipient any documents relating to your matter (eg. visa application or cancellation of a visa), that would otherwise have been sent to you. Under most circumstances, you will not receive a separate copy of the documents. You are taken to have received any documents sent to your authorised recipients as if they had been sent to you.

You should be aware that the documents sent to your authorised recipient might include sensitive information about matters such as your health and character.

If you change your authorised recipient or end their appointment you must promptly advise the Department. You may use this form for that purpose.

Dependent applicants

All persons listed on this form will be considered to have appointed the same authorised recipient.

If a person 16 years of age or older wants to appoint a different authorised recipient they should complete a separate form 956A.

Consent to communicate electronically

The Department may use a range of means to send documents to your authorised recipient. However, electronic means such as fax or email will only be used if your authorised recipient indicates their agreement to receiving documents on your behalf in this way.

To process your matter with the Department (such as visa application or visa cancellation action), the Department may need to communicate with you about sensitive information, for example, health, police checks, financial viability and personal relationships. This means the information may be contained in the documents that are sent to your authorised recipient. Electronic communications, unless adequately encrypted, are not secure, and any information about you sent electronically to your authorised recipient may be viewed by others or interfered with. If your authorised recipient agrees to the Department sending your documents to them by electronic means, the details they provide will only be used by the Department for the purpose of sending documents. They will not be added to any mailing list.

The Australian Government accepts no responsibility for the security or integrity of any information sent to the Department over the internet or by other electronic means.

Important information about privacy

Your personal information is protected by law, including the *Privacy Act 1988.* Important information about the collection, use and disclosure (to other agencies and third parties, including overseas entities) of your personal information, including sensitive information, is contained in form 1442i *Privacy notice.* Form 1442i is available from the Department's website **www.homeaffairs.gov.au/allforms**/ or offices of the Department. You should ensure that you read and understand form 1442i before completing this form.

Home page www.homeaffairs.gov.au

General enquiry line

Telephone **131 881** during business hours in Australia to speak to an operator (recorded information available outside these hours). If you are outside Australia, please contact your nearest Australian mission.



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Department of Home Affairs

Appointment or withdrawal of an authorised recipient

Please open this form using Adobe Acrobat Reader. 8 Address for correspondence Either type (in English) in the fields provided or print this form (If the same as business or residential address, write 'AS ABOVE') and complete it (in English) using a pen and BLOCK LETTERS. Tick where applicable POSTCODE 1 Are you using this form to notify the Department that you are: appointing an Complete Part A and Part C 9 Telephone numbers authorised recipient You do not need to complete Part B COUNTRY CODE NUMBER AREA CODE Office hours) () withdrawing the **Complete Part B and Part C** appointment of an You do not need to complete Part A Mobile/cell authorised recipient 10 Names of other persons 16 years of age or older who are appointing Part A – New appointment the same authorised recipient in relation to the same matter Your details 1. Family name Given names 2 Are you a: visa applicant (tick one only) sponsor or sponsor applicant 2. Family name nominator or nominator applicant Given names proposer or proposer applicant visa holder whose visa is being considered for cancellation or has been cancelled Family name 3. person requesting ministerial intervention Given names If there are more than 3 other persons, give details at Question 30 3 Do you have a Home Affairs (HA) Client ID number (CID)? No **11** Have you appointed a registered migration agent, Australian legal HA Client ID Yes practitioner, or exempt person to provide you with immigration number (CID) assistance? 4 Full name (For an organisation, provide the name of the contact person) No Yes • Give details of the registered migration agent, Australian Title: Mr Mrs Miss Ms Other legal practitioner, or exempt person Family name Family name Given names Given names MONTH YEAR If applicable: 5 Date of birth 7 DIGITS **Migration Agent Registration** 1 1 1 1 1 Number (MARN) Organisation name (if applicable) 6 Note: Your registered migration agent, Australian legal practitioner or exempt person should complete form 956 Appointment of a registered migration agent, legal practitioner or exempt person 7 Business or residential address POSTCODE

Appointment details

12 Are you appointing an authorised recipient in relation to an application process, a cancellation process or another matter (eg. a sponsorship monitoring and sanction activity by the Department, or only one stage of a two stage visa application, or ministerial intervention)?

Application proces Type of application		
Date lodged	Month year	Not yet lodged
Cancellation proce	SS	
Subclass of visa		
	DAY MONTH YEAR	
Date visa granted		
Another matter –	give details	
	give details	

If insufficient space, give details at Question 30

13 Provide the HA ID number (if known) attached to the matter listed in Question 12 in relation to which you are appointing an authorised recipient

HA Request ID number (RID)
HA Transaction Reference
Number (TRN)

Authorised recipient's details

Title: Mr Mrs Miss Ms Other
Family name
Given names
DAY MONTH YEAR
Date of birth
Business or residential address
POSTCODE
Address for correspondence
(If the same as business or residential address, write 'AS ABOVE')
(If the same as business or residential address, write 'AS ABOVE')
(If the same as business or residential address, write 'AS ABOVE')
(If the same as business or residential address, write 'AS ABOVE') POSTCODE Telephone numbers
(If the same as business or residential address, write 'AS ABOVE') POSTCODE Telephone numbers COUNTRY CODE AREA CODE NUMBER Office hours
(If the same as business or residential address, write 'AS ABOVE')
(If the same as business or residential address, write 'AS ABOVE') POSTCODE Telephone numbers Office hours COUNTRY CODE AREA CODE NUMBER Office hours (() Mobile/cell Does this person agree to the Department communicating with
(If the same as business or residential address, write 'AS ABOVE')
(If the same as business or residential address, write 'AS ABOVE')
(If the same as business or residential address, write 'AS ABOVE')
(If the same as business or residential address, write 'AS ABOVE')

Part B – Withdrawing an appointment

20 Your details

Email address

гu	I name (For an organisation, provide the name of the contact person,
Far	nily name
Giv	ven names
	te of birth
Tel	ephone numbers
Off	ice hours () ()
Мс	bbile/cell
	Client ID number (CID)
wit	mes of other persons 16 years of age or older who are hdrawing the appointment of the same authorised recipient in ation to the same matter
1.	Family name
	Given names
2.	Family name
	Given names
3.	Family name
	Given names
Y	our contact details
Bu	siness or residential address
	POSTCODE
Tel	ephone number COUNTRY CODE AREA CODENUMBER
Off	ice hours
Ad	dress for correspondence the same as business or residential address, write 'AS ABOVE')
	POSTCODE
	POSTCODE
(If a Do em	POSTCODE you agree to the Department communicating with you by fax, ail or other electronic means?
(If a	POSTCODE you agree to the Department communicating with you by fax, ail or other electronic means?

25 Authorised recipient's details

Full name

Family name	
Given names	

26 Are you withdrawing the appointment of an authorised recipient in relation to an application process, a cancellation process or another matter (eg. sponsorship monitoring and sanction activity by the Department, or only one stage of a two stage visa application, or ministerial intervention)?

Type of application

DAY

MONTH

Cancellation process

Date visa granted

Subclass of visa

Another matter – give details				
	_			

YEAR

If insufficient space, give details at Question 30

27 Provide the HA ID number (if known) attached to the matter in relation to which you are withdrawing your appointment of the authorised recipient

HA Request ID number (RID)

HA Transaction Reference Number (TRN)

Part C – Declarations Authorised recipient declaration

28 Tick one only

Appointment

I understand that:

- I have been appointed by the persons named in Part A of this form to be their authorised recipient; and
- as the authorised recipient all documents that would otherwise be sent to the persons named in Part A will be sent to me, including by electronic means as indicated in Question 19 (if applicable).

Withdrawal of appointment

I understand that I am no longer acting as authorised recipient for the persons named in Part B of this form in relation to the matter indicated in Part B of this form.

Signature of authorised recipient

Þ	Kai	naČ	San	noto	
DAY	MONTH	YEAR			

Date

Your declaration

29 Tick one only

Appointment

I declare that I have appointed the authorised recipient named in Question 14 of this form to receive all documents relating to the matter indicated in Question 12 on my behalf.

Withdrawal of appointment

I declare that the authorised recipient named in Question 25 of this form is no longer authorised to receive documents relating to the matter indicated in Question 26 on my behalf.

I understand that future correspondence from the Department will be sent to the last address that I have provided in Question 22, 23 or 24.

I will inform the Department of any changes to my address for correspondence.

I declare that:

- I have read the information contained in form 1442i Privacy notice.
- I understand the Department may collect, use and disclose my personal information (including biometric information and other sensitive information) as outlined in form 1442i *Privacy notice*.

Your signature	L			
	DAY	MONTH	YEAR	_
Date				

Signatures of **other persons** 16 years of age or older who are appointing or withdrawing the appointment of the same authorised recipient in relation to the same matter

Signature				
	Þ			
Data	DAY	MONTH	YEAR	
Date				
Signature				
	Þ			
	DAY	MONTH	YEAR	
Date				
Signature				
	Þ			
	DAY	MONTH	YEAR	
Date				

We strongly advise that you keep a copy of this form for your records.

Additional details

30	Question number	Additional information