

## **Permission Form**

## **Bankruptcy & Legal Services Commissioner Checks**

l,	of
	(full name)
	(address)
give my permission following:	n to the Department of Justice, Statutory Appointments to undertake the
	inancial Security Authority National Bankruptcy check and; es Commissioner check <sup>1</sup> .
Signed	
Date	

This check will only be conducted if the nominated person is or has been a Lawyer.