



Australian Government

Department of Immigration and Border Protection

Unaccompanied Minor or Unaccompanied Humanitarian Minor information and care undertaking

Form
1258

Form purpose – This form is only for use by the Department of Immigration and Border Protection (the department) for the purpose of considering the establishment of care arrangements for a minor within the Unaccompanied Humanitarian Minors Programme. The information may also be used to assess the status of the minor under the *Immigration (Guardianship of Children) Act 1946* and to assist in service provision.

This form is not evidence of the establishment of a care arrangement between the minor and proposed carer and does not give any rights or responsibilities in respect of the minor to the proposed carer. It **is not** a legal document and **should not** be submitted for any other purpose to any other agencies or authorities.

Important – Please consider your circumstances, and your capacity and intention to care for the minor, before you sign the declaration at Part D.

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.border.gov.au/allforms/ or offices of the department. You should ensure that you read and understand form 1442i before completing this form.

Please use a pen, and write neatly in English using BLOCK LETTERS.

Tick where applicable

Part A – Minor's details

1 Client ID

2 Family name
Given names

3 Gender Male Female Other

4 Date of birth Day / Month / Year
Age years months

5 Country of birth

6 Citizenship

7 Current location/address

 Postcode

8 Biological mother's details
Full name
Is the biological mother deceased?
No Current location/address

 Postcode
Yes

9 Biological father's details
Full name
Is the biological father deceased?
No Current location/address

 Postcode
Yes

Part B – Proposed carer's details

10 Family name
Given names

11 Gender Male Female Other

12 Date of birth Day / Month / Year
Note: You must be over 21 years of age.

13 Relationship status
Married Separated Never married or
Engaged Divorced been in a de facto
De facto Widowed relationship

14 Relationship to the minor
Sibling Grandparent Cousin Other
Half sibling Uncle/Aunt Step-parent
Outline your biological or marriage connection to the minor

15 How long have you cared for the minor?
 years months

Part C – Arrangements for a minor’s care in Australia

Part C is only for proposed carers already resident in Australia.

16 Are you resident in Australia?

No **▶ Go to Part D**

Yes

17 Are you an Australian citizen?

No

Yes **▶ Your visa status**

18 Will the minor live with you in Australia?

No **▶ Location/address where the minor will live in Australia**

Postcode

Yes **▶ Your location/address in Australia**

Postcode

Type of dwelling (eg. house, flat)

Number of bedrooms in your dwelling

Details of all adults and children who live in your dwelling

Age	Gender		
	Male <input type="checkbox"/>	Female <input type="checkbox"/>	Other <input type="checkbox"/>
	Male <input type="checkbox"/>	Female <input type="checkbox"/>	Other <input type="checkbox"/>
	Male <input type="checkbox"/>	Female <input type="checkbox"/>	Other <input type="checkbox"/>
	Male <input type="checkbox"/>	Female <input type="checkbox"/>	Other <input type="checkbox"/>
	Male <input type="checkbox"/>	Female <input type="checkbox"/>	Other <input type="checkbox"/>
	Male <input type="checkbox"/>	Female <input type="checkbox"/>	Other <input type="checkbox"/>
	Male <input type="checkbox"/>	Female <input type="checkbox"/>	Other <input type="checkbox"/>
	Male <input type="checkbox"/>	Female <input type="checkbox"/>	Other <input type="checkbox"/>

19 Your contact telephone numbers

Office hours (Area code)

Mobile/cell

20 Do you undertake to facilitate schooling for the minor?

No

Yes **▶ Proposed school (if known)**

21 Do you undertake to provide the daily needs of the minor (eg. food, clothing, school supplies)?

No

Yes

Part D – Declaration

WARNING: Giving false or misleading information may result in cancellation of any care arrangement entered into.

22 Carer to complete and sign

- I, undertake to provide care in Australia for the above named minor;
- I understand that if I undertake to provide care for the minor on this form I am responsible for:
 - accommodation;
 - financial support; and
 - day to day care of the minor.
- I understand that I must immediately advise the department if I become aware that any information provided in this form is incorrect.
- 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.
- I understand that this is not a legal document.
- I understand this form is only for use by the Department of Immigration and Border Protection to consider the establishment of a care arrangement for a minor within the Unaccompanied Humanitarian Minors Programme.

Signature of carer

✍

Date / /