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| Application for consent to subcontract to individuals |
| For DCJ human service programs |
| CONTRACT MANAGEMENT FRAMEWORK | Form | 9 June 2023 |
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| This form is used by service providers contracted by the Department of Communities and Justice (DCJ) to apply for consent to subcontract individuals, either directly or through another organisation.  This form is a means of obtaining consent-in-advance from DCJ to subcontract:   * the services you nominate * until expiry of the contract term * subject to the conditions you agree to in the declaration.   You are not required to give the names of the individuals you plan to subcontract to, nor the names of any labour-hire organisations you plan to use. |

Instructions

Before filling in this form, read [*Subcontracting*](https://www.facs.nsw.gov.au/providers/funded/resources/subcontracting) on our website.

Read and follow all instructions (blue text) in this form.

The form is in three parts. You must complete **all** parts.

When you have completed the form and signed the declaration, send the application by email to your DCJ contract manager. You may delete the blue instructions before submitting the form.

We strongly recommend you obtain independent legal advice in relation to this form.

Complete this form for **PSP** subcontracting arrangements if the PSP contract **does not** identify approved subcontracting arrangements.

# Part 1. Application details

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| Date of application | Click here to enter a date. |
| Service provider name | <your organisation’s name> |
| Service provider ID  This can be obtained from the DCJ portal |  |
| Service provider’s representative  The contact person for this application | Name:  Position:  Phone number:  Email address: |
| Name of your assigned DCJ contract manager |  |

## Applicable contract

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| Program contract ID  This can be obtained from the DCJ portal. |  |
| Contract start and end dates  This can be obtained from the DCJ portal. | Click here to enter a date. |

## Reason for subcontracting and your due diligence steps

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| What are the services proposed to be subcontracted?  State the services or activities as they are specified in the contract. | |  |
| Why does <your organisation’s name> propose subcontracting these services? | |  |
| Have you developed or are you planning to develop a process to manage the performance of the proposed subcontractors? | | Yes  No |
| If ‘yes’, provide an outline of the process | |  |
| Type of arrangement proposed | Fee-for-service arrangement, using purchase orders  [ ] other, for example, service agreement (please specify) | |
| Duration of the subcontracting arrangement | Start date:  End date: | |
| Have you sighted and taken a copy of the subcontractors’ current insurance policies? | Yes  No | |
| Have you sighted and taken a copy of the subcontractors’ relevant accreditation, certification, registration or licence, as applicable for this service? | Yes  No | |
| Have you ensured that all applicable staff of each subcontractor has a current Working with Children Check and National Police Certificate and has complied with any other applicable requirements under the Children and Young Persons (Care and Protection) Act and regulations made under this Act? | Yes  No | |

# Part 2. Service provider declaration

1. As authorised signatories\* of <your organisation’s name>, we confirm that:
   1. our governing body is aware of the additional responsibilities and obligations of subcontracting;
   2. our governing body is aware of, and approved the information in this form being submitted to DCJ;
   3. DCJ has strongly recommended we obtain independent legal advice in relation to this form; and
   4. we warrant that all information provided by us in this form is true and correct.

\* Must be an authorised signatory of the organisation, or their delegate.

#### Signature block for organisations with multiple authorised signatories

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|  |  |  |
| *Name* |  | *Name* |
|  |  |  |
| *Position* |  | *Position* |
|  |  |  |
| *Signature* |  | *Signature* |
|  |  |  |
| *Date* |  | *Date* |