This form asks important questions about your complaint. Your information helps us decide what response is needed, but it also helps detect broader issues and corruption risks across the public sector. If we need more information, we will contact you.

Before making a complaint

• Understand who IBAC can and can’t investigate and check if we’re the right agency in Victoria to contact with your concerns.
• Be clear on who and what you are complaining about.
• Understand your privacy options and what happens to your complaint.
• If you have already complained to another agency, please provide those details.
• If you are complaining on behalf of another person, you must have their written consent before filling out this form (see Appendix A).

Privacy

IBAC manages your personal information carefully and in accordance with relevant legislation. If you make a complaint and IBAC determines to refer your complaint to another agency, the information you provide to IBAC, including your personal details, will be forwarded to that agency for the purposes of addressing your complaint.

For further information about how IBAC handles your personal information, please read the Your Privacy page on our website.

How to fill in this form

• Please print clearly, using a black or blue pen.
• Read each question carefully.
• Provide copies of any documents to support the information in your complaint. Please do not provide originals.

Send this form to:

Mail GPO Box 24234 Melbourne Vic 3001
Email info@ibac.vic.gov.au
Fax (03) 8635 6444

Need help?

If you need help with filling out this form, please call us on 1300 735 135.

Services for people who are deaf, hearing or speech impaired

• TTY users phone 1800 555 677 then ask for 1300 735 135.
• Speak and Listen users phone 1800 555 727 then ask for 1300 735 135.
• Internet relay users connect to the National Relay Service and ask for 1300 735 135.

Services for people who need an interpreter or translations

The Translating and Interpreting Service (TIS) has interpreters in more than 120 languages and dialects.

To use this service please phone either:

• IBAC on 1300 735 135, or
• TIS directly on 1300 665 028.

More information

Please read our ‘Reporting corruption and misconduct’ information sheet, available at www.ibac.vic.gov.au
Part A – Your details

1. Do you want to make an anonymous complaint?
You can make a complaint anonymously but this will impact our ability to seek further information and may impact our ability to progress your complaint.

☐ Yes Go to Q15  ☐ No Go to Q2

2. Your name

☐ Mr  ☐ Mrs

☐ Ms  ☐ Miss

☐ Other, please specify: [ ]

Family name (surname)

[ ]

Given name

[ ]

Middle name

[ ]

3. Have you already complained to IBAC about this matter?

☐ Yes  ☐ No

If yes, please provide your IBAC reference number below and go to Q28

[ ]

4. Do you need an interpreter or translator?

☐ Yes  ☐ No

If yes, which language?

[ ]

5. Do you need a communication aid?

☐ Yes  ☐ No

If yes, please describe the aid required:

[ ]

6. Sex

☐ Male  ☐ Female

☐ Unspecified/indeterminate/intersex

7. Are you Aboriginal or Torres Strait Islander?

☐ No

☐ Yes, I identify as Aboriginal

☐ Yes, I identify as Torres Strait Islander

☐ I identify as both

8. Your residential address

Unit/house number and street name (or PO Box, RMB, RRB)

[ ]

[ ]

[ ]

[ ]

[ ]

Is your mailing address the same as above?

☐ Yes  ☐ No

Your mailing address.

Only required if you ticked ‘No’ in the question above.

Unit/house number and street name (or PO Box, RMB, RRB)

[ ]

[ ]

[ ]

[ ]

[ ]

[ ]

[ ]

[ ]

[ ]

9. Contact details

Phone

[ ]

Email:

[ ]

What is the best way to contact you?

☐ Phone  ☐ Email  ☐ Mail
Part B – Your complaint

10. Are you making this complaint on behalf of another person?

You can make a complaint on behalf of another person. However, you will need to prove that the person knows of your complaint and has authorised you to act on their behalf.

☐ Yes Go to Q11  ☐ No Go to Q15

11. Does this person know that you are making this complaint on their behalf?

If you are complaining on behalf of someone else, you must have their written consent. IBAC will be in contact to discuss the consent requirements.

☐ Yes  ☐ No

12. If yes to questions 10 and 11, please provide the details of the person you are making a complaint on behalf of.

☐ Mr  ☐ Mrs

☐ Ms  ☐ Miss

☐ Other, please specify:

Family name (surname)

Given name

Middle name

Unit/house number and street name (or PO Box, RMB, RRB)

Town/suburb

Postcode

State

Country

Phone

13. What is your relationship with the complainant?

I am a:

☐ Parent  ☐ Child

☐ Sibling  ☐ Partner

☐ Friend  ☐ Work colleague

☐ Other

14. Please explain why you are making this complaint on behalf of another person.
15. Have you complained previously to another agency about this matter?
☐ Yes  Go to Q16   ☐ No  Go to Q17

16. Which agency did you complain to, when did you make the complaint and what was the result?
Please provide a copy of any relevant correspondence.

17. Which Victorian Government office or body are you making a complaint about?
☐ Victoria Police (including Protective Service Officers, police officers, custody officers, recruits and employees)
☐ Member of Parliament
☐ State government department/agency
☐ Judge or Magistrate
☐ Council
☐ Public hospital
☐ State primary or secondary school
☐ Agency – other
☐ Other, please specify:


18. Please provide details of your complaint.
Name of the person you are complaining about, organisation where they work and position/rank if known.
19. What is the corrupt conduct or police personnel misconduct you believe occurred?
20. When did the conduct occur?
If you don’t know an exact time or date, please provide an approximate, eg January 2013. If the conduct happened more than once than please list the approximate timeframes.

21. Did the conduct you are complaining about occur more than 12 months ago?  
☐ Yes Go to Q22  ☐ No Go to Q23

22. Please explain why you did not make this complaint to IBAC sooner.  
Section 67(2) (e) of the IBAC Act 2011 provides that IBAC may dismiss the complaint if it is too remote in time. So you need to explain why you have not made the complaint sooner.  
Also section 67(3) requires an explanation about why you did not make a complaint to IBAC within 12 months of the behaviour you are complaining about.

23. Where did the conduct occur?  
Include address if known.  
Suburb/town

Location/station (eg Smithtown Police Station, The Redbook Hospital)
24. Do you have any other information you wish to provide?
For example, occupation of person, badge number, car registration, etc.

25. What was the impact of the conduct you are complaining about?
For example, injury, financial, personal or professional loss.
26. Did anyone else witness the conduct?
☐ Yes       ☐ No

Witness details

27. What outcome are you seeking by making this complaint?

Please note IBAC cannot consider or award compensation, or consider the merits of a judicial decision or order.
28. If you’ve previously complained to IBAC about this matter, please provide any further information you wish to include regarding your existing complaint.
Appendix A – Authority to Act

I, ______________________________________ (name) of ______________________ (address),
hereby authorise ______________________________________ (name - individual/legal representative/organisation) of ______________________ (address),
to act on my behalf in regards to my complaint to the Independent Broad-based Anti-corruption Commission (IBAC). This authority includes:

- receiving and submitting documentation on my behalf;
- obtaining and providing personal information relevant to my complaint; and
- corresponding with IBAC both verbally and in writing.

The Authority to Act is limited to this complaint and remains in force whilst this complaint is being considered or investigated by IBAC, unless withdrawn by me earlier. I understand that the Authority to Act can be withdrawn or amended by me at any time by notifying IBAC in writing.

Signature: ______________________________________ (Signature required)

Name ______________________________________

Date ______________________________________

Privacy statement
IBAC is committed to guarding against misuse, loss or unauthorised disclosure of personal information in accordance with the Privacy and Data Protection Act 2014 and the Health Records Act 2001, including the Privacy Principles within each Act. For more information on IBAC’s privacy policy see www.ibac.vic.gov.au

______________________________
Entered by
Important information

IBAC complies with Victorian privacy legislation when collecting and managing personal and health information.

IBAC’s Personal Health and Sensitive Information Statement details how IBAC collects, manages, uses and discloses personal information. IBAC is legally authorised to disclose information to outside persons and bodies in certain circumstances.

It is an offence to make a false complaint or misleading information to IBAC.Wilfully providing false or misleading information to IBAC may result in criminal prosecution.

IBAC will only contact you if more information is required. If you have opted to provide this complaint anonymously, we will not be able to contact you and you will receive no feedback on the outcome of your complaint.

Declaration

☐ To the best of my knowledge, the information provided in this complaint is correct.
☐ I understand there are penalties for giving IBAC false or misleading information.
☐ I understand the information on this form may be disclosed to another agency or body.
☐ I am making this complaint on behalf of another person and have completed Appendix A.

Name

Date