



# Details of child or other dependent family member aged 18 years or over

Important – Please read this information carefully before completing the application. Once the application is completed we strongly advise that the applicant keep a copy for their records.

## About this form

This form must be completed for each dependant aged 18 years or over **whether migrating or not**. If there is insufficient space to answer, provide details under 'Additional information' at the end of this form.

## Life in Australia – Australian values

The Australian Government encourages people to gain an understanding of Australia, its people and their way of life, before applying for a visa to live in Australia.

This includes understanding that the English language, as the national language, is an important unifying element of Australian society. Australian society is also united through the following shared values:

- respect for the freedom and dignity of the individual;
- freedom of religion;
- commitment to the rule of law;
- Parliamentary democracy;
- equality of men and women;
- a spirit of egalitarianism that embraces mutual respect, tolerance, fair play and compassion for those in need and pursuit of the public good;
- equality of opportunity for individuals, regardless of their race, religion or ethnic background.

The *Life in Australia* booklet provides more information on the values that Australians share and their way of life. This booklet is available in a wide range of languages. If the dependant has not already received a copy of the booklet then it can be obtained from [www.immi.gov.au](http://www.immi.gov.au)

If the dependant is applying for a visa to migrate to Australia then they must have read the *Life in Australia* booklet before completing this application form. If they have difficulty, or are unable to read the booklet, they may have the content of it explained to them, for example, by a friend or relative. This form contains a statement, that they must sign, that confirms they understand and will respect the values of Australian society (as explained in the booklet) and will obey the laws of Australia. This includes acknowledging what would be required if they later applied for Australian citizenship.

Dependants who are seeking to be added to an existing application, which was lodged before 15 October 2007, may not need to sign the statement. If the dependant has concerns about signing the statement then the dependant or main visa applicant should speak to their case officer.

## Integrity of application

The Department of Immigration and Citizenship (the department) is committed to maintaining the integrity of the visa and citizenship programs. Please be aware that if you provide us with fraudulent documents or claims, this may result in processing delays and possibly your application being refused.

## About the information you give

The department is authorised to collect information provided on this form under Part 2 of the *Migration Act 1958* 'Control of Arrival and Presence of Non-citizens'. The information provided will be used by the department for assessing your eligibility for a visa to travel to, enter and remain in Australia. It may also be used for other purposes relating to the administration of the Migration Act, for example, to assist migrants with settling in Australia, to monitor the conduct of migration agents or for ensuring compliance with the Migration Act. The information provided might also be disclosed to agencies who are authorised to receive information relating to adoption, border control, business skills, citizenship, education, health assessment, health insurance, health services, law enforcement, payment of pensions and benefits, taxation, review of decisions and regulation of migration agents.

The information provided on this form, including any information on health, will be used to assess the dependant's health for an Australian visa and may be disclosed to the relevant Commonwealth, state and territory health agencies and examining doctor(s).

Form 1071i *Health Requirement for permanent entry to Australia* provides additional information on Australia's visa health requirements. This form is available at offices of the department or from the department's website [www.immi.gov.au/allforms/](http://www.immi.gov.au/allforms/)

The collection, access, storage, use and disclosure by the department of the information you provide in this form is governed by the *Privacy Act 1988* and, in particular, by the 11 Information Privacy Principles. The information form 993i *Safeguarding your personal information*, available from the department's website or from an office of the department, gives details of agencies to which your personal information might be disclosed.

The department is authorised under the *Migration Act 1958*, in certain circumstances, to collect a range of personal identifiers including a facial image, fingerprints and a signature from non-citizens, including from visa applicants. The department requires personal identifiers to assist in assessing your identity. The department is authorised to disclose your personal identifiers and information relating to your name and other relevant biographical data to a number of agencies including law enforcement and health agencies and to other agencies who may need to check your identity with this department. Where the department obtains personal identifiers they will become part of your official record with the department.

The department is involved in international information exchanges with a number of countries, including the United Kingdom, the United States of America, Canada and New Zealand. These international information exchanges may involve the sharing of personal identifiers, including facial images and fingerprint data, collected by immigration agencies such as this department. If, as a result of this sharing between countries, there is a match with your personal identifiers, the department will disclose your biographical data, copies of travel and other identity documents or information from such documents, your immigration status and immigration history (which may include any immigration abuse and offences) and any criminal history information relevant to immigration purposes. The purpose of such disclosure would be to help confirm your identity and determine if you have presented to the department and the other agency under the same identity and with similar claims.

For more detailed information you should read information form 1243i *Your personal identifying information*, which is available from the department's website

[www.immi.gov.au/allforms/](http://www.immi.gov.au/allforms/) or from any office of the department or Australian mission overseas.

*Home page* **[www.immi.gov.au](http://www.immi.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.

*Please keep these information pages for your reference*



# Details of child or other dependent family member aged 18 years or over

A **separate** form 47A must be completed for each dependant aged 18 years or older **whether migrating or not**.  
If there is insufficient space to answer, provide details under 'Additional information' at the end of this form.

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

Tick where applicable

## *Part A – Main visa applicant's details*

**1** Full name of main visa applicant

**2** Main visa applicant's date of birth

DAY	MONTH	YEAR
/	/	

**3** Main visa applicant's file number

## *Part B – Child's/dependant's details*

**4** Dependant's full name  
*(as shown in the dependant's passport or travel document)*

Family name

Given names

**5** Dependant's name in their own language or script  
*(if applicable)*

**6** Other ways you spell the dependant's name

Family name

Given names

**7** Other names the dependant is, or has been, known by  
*(including name at birth, previous married names, aliases)*

*For other names, provide required details under 'Additional information' at the end of this form*

**8** Dependant's sex    Male     Female

**9** Dependant's date of birth

DAY	MONTH	YEAR		Age
/	/			

**10** Dependant's place of birth

Town/City

Country

**11** Of which countries is the dependant a citizen?

**12** Dependant's country of current residence

**13** Details from the dependant's passport

Passport number

Country of passport

Date of issue

DAY	MONTH	YEAR
/	/	

Date of expiry

DAY	MONTH	YEAR
/	/	

Issuing authority/  
Place of issue as shown in the dependant's passport

**14** If applicable, details of identity card or identity number issued to the dependant by their government eg. National identity card.

**Note:** If the dependant is the holder of multiple identity numbers because they are a citizen of more than one country, provide the identity number on the card from the country the dependant is a permanent resident of, or resides in.

Identity number

Country of issue

**15** Does this dependant have any other identification numbers?  
(eg. Chinese commercial code number, social security card or alien registration)

No

Yes  Give details

1. Country   
 Type of ID   
 Number

2. Country   
 Type of ID   
 Number

3. Country   
 Type of ID   
 Number

**16** Dependant's current relationship status

Never married or been in a de facto relationship

Widowed

Divorced

Separated

Engaged to be married

Name of intended spouse

  


Date of intended marriage  DAY /  MONTH /  YEAR

Married or in a de facto relationship

Name of partner

  


Date of marriage or date de facto relationship began  DAY /  MONTH /  YEAR

**17** Does this dependant live at the same address as the main visa applicant?

No  Provide this dependant's address

  
  
 POSTCODE

Yes

**18** Dependant's telephone numbers

Office hours  COUNTRY CODE ( ) ( ) AREA CODE NUMBER

After hours  ( ) ( )

Mobile/cell

**19** Will this dependant migrate with the main visa applicant?

No  Why not?

  
  


Yes  If the visa is granted, which state or territory of Australia does this dependant propose to live in?

Australian Capital Territory  Tasmania   
 New South Wales  Victoria   
 Northern Territory  Western Australia   
 Queensland  External Territory   
 South Australia  Don't know

**20** Dependant's main language

**21** How well does this dependant communicate in English? Better than functional   
 Functional   
 Limited   
 Not at all

**22** Other languages this dependant reads, understands, speaks and writes fluently

**23** Give full details of the dependant's education including details of qualifications

Please enclose evidence of qualifications obtained by the dependant

1. Name of institution

  


Location

Type of institution (eg. primary, secondary, tertiary or other post-secondary)

Commencement date  DAY /  MONTH /  YEAR

Finish date  / /

Qualification

Language(s) of institution

2. Name of institution

  


Location

Type of institution (eg. primary, secondary, tertiary or other post-secondary)

Commencement date

DAY	MONTH	YEAR
/	/	

Finish date

DAY	MONTH	YEAR
/	/	

Qualification

Language(s) of institution

3. Name of institution

  


Location

Type of institution (eg. primary, secondary, tertiary or other post-secondary)

Commencement date

DAY	MONTH	YEAR
/	/	

Finish date

DAY	MONTH	YEAR
/	/	

Qualification

Language(s) of institution

25 Is this dependant currently employed?

No  Give reasons why the dependant is not employed. If the dependant has a disability which stops them from working, you must provide a report from a qualified medical practitioner to support your claim

  
  
  
  
  
  


Yes  Name and address of dependant's employer

  
  


Date commenced

DAY	MONTH	YEAR
/	/	

Number of hours worked per week

Weekly earnings in local currency

24 Give details of the dependant's previous employment history (list most recent experience first)

Period		Name and address of employer	Type of business	Occupation
FROM	TO			
MONTH	YEAR			
FROM	/			
TO	/			
FROM	/			
TO	/			
FROM	/			
TO	/			
FROM	/			
TO	/			

**26** Give details of the dependant's main source of financial support (*eg. relative, government welfare department*)

Full name of person or source

Address   
  
 POSTCODE

Type of support provided to the dependant (*eg. money, food, clothing, rental assistance*)

If money is provided to the dependant: Give the amount in local currency

What is the money used to purchase?

Period that support has been provided from  DAY MONTH YEAR to  DAY MONTH YEAR

Give details of any OTHER sources of financial support for the dependant including the type and amount of support provided by that source


**Part C – Dependant's family details**

**27** Give details of this dependant's family members  
*(If not living, write 'DECEASED' in country of current residence column. If whereabouts unknown, write 'UNKNOWN')*

Full name	Sex	Date of birth			Relationship status (use codes below)	Country of current residence	If in Australia, immigration status eg. permanent
	M/F	DAY	MONTH	YEAR			

Dependant's parents

		/	/			
		/	/			

All dependant's brothers and sisters (*including full, half, step and adopted brothers and sisters*)

		/	/			
		/	/			
		/	/			
		/	/			
		/	/			
		/	/			

Any dependent children of this dependant (*including from previous marriages/relationships*)

		/	/			
		/	/			
		/	/			
		/	/			
		/	/			
		/	/			

**'Relationship status' codes**    **M** = Married    **F** = De facto    **D** = Divorced    **N** = Never married or been in a de facto relationship  
**E** = Engaged    **S** = Separated    **W** = Widowed



# Part F – Signatures

## 30 AUSTRALIAN VALUES STATEMENT

This statement must be signed by the dependant if they are applying for a visa to migrate to Australia, unless the dependant is seeking to be added to an existing visa application which was lodged before 15 October 2007. If the dependant is not applying to migrate then they do not need to sign this statement.

*I confirm that I have read, or had explained to me, information provided by the Australian Government on Australian society and values.*

*I understand:*

- *Australian society values respect for the freedom and dignity of the individual, freedom of religion, commitment to the rule of law, Parliamentary democracy, equality of men and women and a spirit of egalitarianism that embraces mutual respect, tolerance, fair play and compassion for those in need and pursuit of the public good;*
- *Australian society values equality of opportunity for individuals, regardless of their race, religion or ethnic background;*
- *the English language, as the national language, is an important unifying element of Australian society.*

*I undertake to respect these values of Australian society during my stay in Australia and to obey the laws of Australia.*

*I understand that, if I should seek to become an Australian citizen:*

- *Australian citizenship is a shared identity, a common bond which unites all Australians while respecting their diversity;*
- *Australian citizenship involves reciprocal rights and responsibilities. The responsibilities of Australian citizenship include obeying Australian laws, including those relating to voting at elections and serving on a jury.*

*If I meet the legal qualifications for becoming an Australian citizen and my application is approved I understand that I would have to pledge my loyalty to Australia and its people.*

**Signature of dependant applicant**

Date

DAY	MONTH	YEAR
/	/	/

## 31 DECLARATION

**WARNING:** Giving false or misleading information is a serious offence.

This declaration must be signed by the main visa applicant, the main applicant's spouse or de facto partner (if applicable) and the dependant named on this form.

- *I declare that the information supplied on this form, and any attachments, is complete, true and up to date in every detail.*

**Signature of main visa applicant**

Date

DAY	MONTH	YEAR
/	/	/

**Signature of main visa applicant's spouse or de facto partner**

Date

DAY	MONTH	YEAR
/	/	/

**Signature of dependant**

Date

DAY	MONTH	YEAR
/	/	/

We strongly advise that the applicant keep a copy of the application and all attachments for their records.