



# Application for 2 hours of Counselling

Reference Number

A victim of violent crime may apply for an initial period of 2 hours counselling under section 21 of *Victims Support and Rehabilitation Act 1996*.

## Part 1 Details of Victim *Note: If you are a family member of a homicide victim, please contact us for the appropriate form.*

**1. Have you already applied for compensation?**  
 No  Yes  → If Yes, please provide our reference number

**2. Surname**  **Given Names**

**3. Title** Miss  Ms  Mrs  Mr  Dr

**4. Date of Birth**  /  /

**5. Gender**

**6. Address**   
 Post Code

**7. Contact Phone No. (Bus. Hrs)** ( )  Mobile

**8. Your solicitor** *(if you have one representing you in this application all correspondence will go directly to your solicitor.)*  
**Name of Solicitor/firm**   
**Address**   
**Contact numbers:** Phone ( )  Fax ( )

## Part 2 Details of person applying on behalf of the above victim *(if applicable)* *If the victim is under 18 years or incapacitated, the person responsible for the welfare of the victim may apply on their behalf.*

**9. Surname**  **Given Names**

**10. Title** Miss  Ms  Mrs  Mr  Dr

**11. Your relationship to the victim:** Parent  Other *(specify)*

**12. Reasons for acting on behalf of victim:** Victim under 18 years   
 Other *(specify)*

**13. Address**   
 Post Code

**14. Contact Phone No. (Bus. Hrs)** ( )  Mobile

## Part 3 Details of the act(s) of violence

**15. When did the act(s) of violence happen?** Date  /  /   
 Or, over a period of time From  /  /  To  /  /

**16. Where in NSW did the act(s) of violence happen?** *If full address is not known it is important to provide suburb/town.*  
  
 Post Code

**17. Briefly describe what happened**

**18. Please tick one appropriate answer in relation to this act of violence:**

Were you a victim of an act of violence? Yes  No

Did you witness the act of violence? Yes  No

Are you a parent of a child who was a victim of an act of violence? Yes  No

19. Was the matter reported to the police? Yes  No

20. If so, what police station was it reported to?

21. COPS Event No. (if known)  Date Reported  /  /

*If you have a copy of the statement you made to the Police you may attach it to this form.*

**Part 4 Details of counsellor** A list of approved counsellors is available on our website [www.lawlink.nsw.gov.au/vs](http://www.lawlink.nsw.gov.au/vs)

22. Would you like us to allocate an approved counsellor on your behalf? Yes  No

23. If No, please provide the name of the approved counsellor of your choice

24. If Yes, please let us know any special requirements you may have:

Preferred suburb(s)/town(s) for attending counselling

Male  Female  Preferred language for counselling

Disability access required  Other

**Part 5 Statistical Information** *The following questions are optional for statistical and planning purposes only.*

25. What is your occupation?

26. Are you an Aboriginal or Torres Strait Islander?

27. What country were you born in?

**Part 6 Applicant's Declaration**

I hereby apply for 2 hours of counselling pursuant to section 21 of the *Victims Support and Rehabilitation Act 1996*. I am aware that the contents of my counselling session may be used in the preparation of a report to Victims Services for the purposes of subsequent counselling and/or compensation applications.

Applicant's signature  Date  /  /

Or I,  am signing this application on behalf of the victim because  
(please provide reasons)

Signature  Date  /  /

**What happens next**

When you complete this form please forward it to Victims Services for processing. A decision regarding the approval of counselling should be given to yourself, or your solicitor (*if you have a solicitor representing you in this matter*) within 48 hours.

**You may send your completed form by fax to:** Fax Number: (02) 9374 3120  
**Or, post it to:** The Director, Victims Services, Locked Bag A5010,  
SYDNEY SOUTH NSW 1235  
**Solicitors may use the Document Exchange:** DX 11536 SYDNEY DOWNTOWN

Applications may also be lodged online at our website [www.lawlink.nsw.gov.au/vs](http://www.lawlink.nsw.gov.au/vs) and further information may be found there. Contact us on (02) 9374 3111 or 1800 069 054 (toll free) or TTY (02) 9374 3175 (*if you use a TTY*). You may also send an email if you have an enquiry to: [vct@agd.nsw.gov.au](mailto:vct@agd.nsw.gov.au)

**Telephone Interpreting Service 131 450**