

Before you complete this form

What this form is for

If you have a current RSA/RCG interim certificate but the details entered by your training provider are not correct, you should complete this form before you apply for your competency card at Service NSW.

Don't use this form if you already have your RSA/RCG competency card and need to change your name. You'll need to use the CC0500 'Replacement competency card' form available at liquorandgaming.justice.nsw.gov.au.

Note:

You cannot work without a valid competency card or interim certificate if your work involves:

- ▲ selling, serving or supplying alcohol in a licensed business, or working with gaming machines in hotels and clubs in NSW
- ▲ being an RSA marshal or security guard in the liquor or gaming industry
- ▲ staffing an ID scanner in Kings Cross.

Cost

There is no fee for this service.

If information is missing, we'll need to ask you to supply the required information to support the application. This may delay our response.

Please check

- Have you answered all questions in Parts 1 to 3?
- Have you read and signed Part 4?

How to lodge this form

@ competencycard@justice.nsw.gov.au
Include 'CC0300 Interim certificate amendment' in the subject line.

✉ Competency Cards
Liquor & Gaming NSW
GPO Box 7060
Sydney NSW 2001

👤 Liquor & Gaming NSW
Level 6, 323 Castlereagh Street
Haymarket NSW 2000
Monday–Friday, 9am–5pm

Provide all pages of this application and supporting documents. There's no need to include this introduction page.

Need more information?

🔍 liquorandgaming.justice.nsw.gov.au
Search for 'Competency cards'.

@ competencycard@justice.nsw.gov.au
📞 1300 024 720

Your privacy

We will handle your personal information in accordance with the *Privacy and Personal Information Protection Act 1998*. It is being collected by Liquor & Gaming NSW and will be used for the purpose of processing your application and may be disclosed to other Government agencies for this purpose. You have the right to request access to, and correct details of, your personal information held by us. You can access further information on privacy at liquorandgaming.justice.nsw.gov.au.

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OFFICE USE ONLY **CC0300**

By Email Mail OTC

Date lodged

Application no.

Finalised by

Date finalised

Notification issue date

Part 1 Your correct details

- ▶ Please complete all requested details, even if they are correct or not shown on your interim certificate.
- ▶ You must enter your full name exactly as it appears on your proof of identity documents.

Mr Ms Mrs Miss Other

Given name (may be more than one)

Middle name (may be more than one)

Family name

Date of birth

Your email address and/or mobile number are required to receive renewal alerts, renew your competency card and access your digital competency card.

Email

Contact phone

Correspondence address

PO box or street address where your card will be sent via Australia Post regular service

Suburb/town/city

State Postcode

Part 2 Details currently on the interim certificate

Interim certificate no.

Provide ALL details as they are shown on your certificate, and indicate if each detail is **wrong** or **correct**.

Mr Ms Mrs Miss Other

Wrong **Correct**

Given name

Wrong **Correct**

Middle name

Wrong **Correct**

Family name

Wrong **Correct**

Date of birth

Wrong **Correct**

Part 3 Course details

Interim certificate type that needs changing

RSA RCG

Name of registered training organisation/s

Date of course completion

DD / MM / YYYY

Part 4 Declaration

- ▲ I declare that the information I have provided is true, correct and complete, and that I have made all reasonable enquiries to obtain the information required to complete this form.
- ▲ I acknowledge that the failure to provide all required information may result in an inability to process this application or a delay in the processing of this application.
- ▲ I acknowledge that it is an offence to provide false or misleading information.
- ▲ I understand that specific details I have provided may be 'personal information' under the *Privacy and Personal Information Protection Act 1998*.

Name

Signature

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Date

DD / MM / YYYY
