

STATUTORY DECLARATION

I, *[insert name]* of *[insert address]*, in the State of New South Wales, being a duly authorised officer of *[insert company name]* (**the Company**), do solemnly and sincerely declare as follows:

1. In respect of the Company, I am not aware of:

1. any current or unresolved complaints of bullying, harassment and assault in the workplace with either past or present officers, employees, contractors, freelancers or any current or unresolved claim under the *Age Discrimination Act 2004* (Cth), *Disability Discrimination Act 1992* (Cth), *Racial Discrimination Act 1975* (Cth), *Anti-Discrimination Act 1977* (Cth), the *Sex Discrimination Act 1984* (Cth), the *Work Health and Safety Act 2011* (Cth) or the *Fair Work Act 2009* (Cth);
2. any current or historical Deed of Confidentiality or other legal instruments to prevent past or present officers, employees, contractors or freelancers from reporting incidents of bullying, harassment and assault in the workplace under the *Age Discrimination Act 2004* (Cth), *Disability Discrimination Act 1992* (Cth), *Racial Discrimination Act 1975* (Cth), *Anti-Discrimination Act 1977* (Cth), the *Sex Discrimination Act 1984* (Cth), the *Work Health and Safety Act 2011* (Cth) or the *Fair Work Act 2009* (Cth);
3. *any current investigation instigated by the Australian Human Rights Commission (AHRC) into the Company in relation to any complaints of discrimination and breaches of human rights; and*
4. *any person in the Company subjecting another person to a workplace environment that is hostile on the ground of sex in accordance with section 28M of the Sex Discrimination Act 1984 (Cth).*

2. In respect of the Company, I warrant that:

1. the Company is not currently contravening any of its obligations in relation to the management of its employees under the *Fair Work Act 2009* (Cth);
2. all employees of the Company are employed pursuant to the National Employment Standards and the *Fair Work Act 2009* (Cth);
3. an active Employee Assistance Program (**EAP**) is currently in place to provide employees and past employees with counselling and assistance;
4. an independent complaints reporting process is currently in place, such as Rep Safe or a like service (**Independent Complaints Reporting Process**), to provide, safe, confidential or anonymous reporting of bullying, harassment and assault in the workplace;
5. the EAP and Independent Complaints Reporting Process are actively and regularly promoted to agents, sub-agents, officers, directors, related entities, employees, contractors, freelancers, representatives, affiliates and clients;
6. *the Company takes reasonable and proportionate measures to eliminate sexual harassment, hostile environments, and victimisation;*
7. *the Company conducts regular risk assessments and audits to identify and mitigate any factors that may cause discrimination or harassment;*
8. *the Company conducts regular education and training with all employees to educate employees on sexual harassment and discrimination;*
9. *the Company provides employees with readily accessible avenues to notify senior staff and/or management of any discrimination or harassment that an employee is experiencing or is aware of;*
10. *the Company regularly reviews and updates workplace policies relating to discrimination and harassment;*
11. *employees are encouraged to report any discrimination or harassment that they experience or are aware of; and*
12. *employees are regularly consulted and asked to provide input about processes and procedures to improve workplace culture and environment.*

*[\* please cross out or strike through any text that does not apply]*

And I make this solemn declaration conscientiously believing the same to be true and by virtue of the provisions of the *Oaths Act, 1900* (as amended).

**SUBSCRIBED AND DECLARED )**

by )

at this )

day of 2022 ) As a duly authorised officer of *[insert company name]*

before me:

 Justice of the Peace/Solicitor

in the presence of an authorised witness, who states:

I, *[name of authorised witness],*

a *[qualification of authorised witness],*

certify the following matters concerning the making of this statutory declaration by the person who made it: *[\* please cross out any text that does not apply]*

* 1. \*I saw the face of the person *OR* \*I did not see the face of the person because the person was wearing a face covering, but I am satisfied that the person has a special justification for not removing the covering.
	2. \*I have known the person for at least 12 months *OR* \*I have confirmed the person's identity using the following identification document:

 *[describe identification document relied on]*

 *[date]*

 *[signature of authorised witness]*