

**AUTHORITY TO ACT**

I, [INSERT NAME OF AGGRIEVED PERSON], authorise [INSERT NAME OF AUTHORISED PERSON] to act on my behalf in relation to the complaint I have made to the Australian Human Rights Commission (the Commission) against the [INSERT NAME OF RESPONDENT/S].

I understand that officers of the Commission will deal directly with [INSERT NAME OF AUTHORISED PERSON] in relation to this complaint.

I authorise [INSERT NAME OF AUTHORISED PERSON] to:

* Provide information and documents to the Commission in connection with the Commission’s assessment, investigation and conciliation of my complaint.
* Receive information and documents from the Commission about my complaint. These documents could include responses provided by [INSERT NAME OF RESPONDENT/S] and correspondence from the Commission.
* Discuss my complaint with officers of the Commission.

I understand that I can withdraw my authority to act at any time by contacting the Commission.

I understand that the Commission will use and store my personal information in accordance with the *Privacy Act 1988* (Cth).

Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name: [AGGRIEVED PERSON’S NAME]

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_