

## YOORROOK JUSTICE COMMISSION SUBMISSION FORM

The Yoorrook Justice Commission is looking into historic and ongoing systemic injustice experienced by First Peoples in Victoria since colonisation. You can make a submission about any injustice experienced by First Peoples.

### **Making a Hard-Copy Submission**

To make a submission, fill-in this form, then mail it to:

Yoorrook Justice Commission Locked Bag 7777 Collingwood, Victoria 3066

Or scan and email to enquiries@yoorrook.org.au

#### Help to Make a Submission

If you would like help to fill in this form or with any other aspect of making a submission, you can call 1800 966 775 or email <a href="mailto:enquiries@yoorrook.org.au">enquiries@yoorrook.org.au</a>.

### **Getting Support**

First Peoples can get free, confidential and safe wellbeing support before, during and after making a submission. To speak to a counselor, please call 1800 966 775 or email sewb.yoorrook@fphw.org.au.

First Peoples can also get free, confidential and independent legal advice about sharing your story safely with Yoorrook. For legal support, please call (VLA) 8610 9830 or email: <a href="mailto:lotjpa@vla.vic.gov.au">lotjpa@vla.vic.gov.au</a> or (VALS) 9418 5999 or email: <a href="mailto:lotjpa@vals.org.au">lotjpa@vals.org.au</a>

#### About the Submission Form

There are four sections to this submission form:

**PART A** asks for basic information and any support you would like.

**PART B** asks you to share your story.

**PART C** asks about how you would like your information protected.

**PART D** asks for information about who you are (optional).

Questions marked as \*(required) need to be answered.



# PART A: BASIC INFORMATION

_	you identify as Aboriginal, Torres Strait Islander, First Nations or First ples? *(required)
$\bigcirc$	Yes
$\bigcirc$	No
Who	o is making this submission? *(required)
$\bigcirc$	Me
	What is your name? Leave blank if you prefer not to say
	Who is/are your mob/s? Leave blank if you prefer not to say
$\bigcirc$	A family or community group (please write the name of the family or group below)
$\bigcirc$	A Victorian Traditional Owner Group (please write the name of the Traditional Owner Group)



Yoorrook can connect you to a range of free and confidential support options. Pease indicate any support you would like. You may choose more than one.

You may choose more than one					
I do not require support					
I would like support to complete this form					
I would like social and emotional well-being support. (We will provide your details to First Peoples' Health and Wellbeing to contact you to provide social and emotional well-being support)					
I would like legal support. (We will provide your details to the Lotjpa Independent Legal Service to contact you to provide legal support)					
Lotjpa Independent Legal Service is provided jointly by the Victorian Aboriginal Legal Service (VALS) and Victoria Legal Aid (VLA).					
Who would you like to contact you?					
○ VALS ○ VLA ○ No preference					
My preferred contact method is by? *(required) We may need to contact you to check information in this form or provide you with support that you've requested. Please provide the details of your preferred contact method.					
Email					
Phone Number					
Text Message					
Address					
I do not want to be contacted					



### PART B: YOUR STORY

Yoorrook is looking into historical and ongoing systemic injustice experienced by First Peoples since colonisation. You can make a submission about any aspect of injustice experienced by First Peoples. Please make sure you have consent from any person or group whose truth you are sharing.

You can make a submission in whatever form you prefer. For example, it may be written, a video, an audio recording and/or a material object such as an artwork, cultural artefact, or photo.

You can write your submission in the box below. If you need more space, you can attach more paper. If you would like to make your submission in another form (e.g. a video or audio recording), please contact 1800 966 775 or email <a href="mailto:enquiries@yoorrook.org.au">enquiries@yoorrook.org.au</a> and we will get in touch with you.

Wri	Write your submission here:						



## PART C: PROTECTING YOUR INFORMATION

Indigenous Data Sovereignty asserts the right of Indigenous Peoples to own, control, access and possess data that derive from them.

The Yoorrook Justice Commission applies Indigenous Data Sovereignty protocols to the collection, storage, and use of First People's information. These protocols respect the decisions you make on how your information is used, protected, accessed, and shared now and in the future.

Yoorrook uses submissions to inform our inquiries. We will not use your submission for any other purpose without contacting you for permission.

This section is about your choice on whether you want your submission published or not, and whether to include your name, or not. If a submission is published it is a public document that can be read by anyone and Yoorrook may refer to or quote from published submissions in our reports.

### Please choose one of the following options: \* (required)

$\bigcirc$	I agree to Yoorrook publishing my submission including my name (or my group's name if it is a group submission)
$\bigcirc$	I agree to Yoorrook publishing my submission anonymously without my name (or my group's name if it is a group submission)
$\bigcirc$	Do not publish my submission (Yoorrook will still read your submission and it will inform our work, but Yoorrook will not publish it on our website or refer to it or quote from it in our reports. Your submission will be kept confidential.)

Please note that Yoorrook will not publish all or part of a submission if it considers it inappropriate to do so.



# PART O: ABOUT YOU

Prefer not to say

The following section is optional.

What is your current postcode?						
What is your age?						
$\bigcirc$	I am under 25 years old					
$\bigcirc$	I am between 25 - 65 years old					
$\bigcirc$	I am over 65 years old					
$\bigcirc$	Prefer not to say					
Wha	t Gender do you identify as?					
$\bigcirc$	Female					
$\bigcirc$	Male					
$\bigcirc$	Other					