## **Statutory Declaration**

[full name]	
[full name]	
f[address]	
[address]	
	, do solemnly and sincerely declare that:-
[occupation]	
	nduct for Aged Care and watched the training video e Quality and Safety Commission about the Code of
	ment quiz regarding the Code of Conduct published nd Safety Commission and have achieved a result of
	n is true and correct, and I make it with the understand alse declaration is liable to the penalties of perjury.
Declared at	
nis day of	20
	Signature of person making this declaration [to be signed in front of an authorised witners]
Before me,	
signature of Authorised Witness	

The authorised witness must print or stamp his or her name, address and title under section 107A of the *Evidence* (*Miscellaneous Provisions*) *Act 1958* (as of 1 January 2010), (previously *Evidence Act 1958*), (eg. Justice of the Peace, Pharmacist, Police Officer, Court Registrar, Bank Manager, Medical Practitioner, Dentist)