## Senate Finance and Public Administration Standing Committee

## BUDGET ESTIMATES – 27 May 2010 ANSWER TO QUESTION ON NOTICE

## Human Services Portfolio

**Topic:** Parliamentary Library Request for information

**Question reference number:** HS 19(a)

**Senator: COLLINS** 

**Type of question:** Hansard F&PA page 105, 27 May 2010

Date set by the committee for the return of answer: 9 July 2010

Number of pages: 3

**Question:** 

**Senator JACINTA COLLINS** - Could we have the pro forma too, please.

**Answer:** 

A copy of the Data Request proforma is attached.





## **Australian Government**

DATA REQUEST PROFORMA

DATE REQUEST TROP	TAINT
Basic Details	
Requesting organisation/person:	
Contact name:	
ABN:	
Email:	
Address:	
Phone number:	
Issues to be examined within the	rs to the following questions to assist with the clearance process
data:	
Intended usage (eg internal use, report, presentation):	
Reason for undertaking this work:	
Office Use Only	
Service First Number	
Category	One Two Three
Date Requested	
Date Required	
Approved by Privacy	N/A ☐Yes
Approved by Media	□N/A □Yes
Approved by Policy Department	N/A Yes No Pending
Approved by Briefs	Yes No Pending
Approved by National Manager P&IMB	☐Yes ☐No ☐Pending
Declaration	
released it must be cleared by the whole or part, under the responsibile	tion received (date) you're advised that before any information can be relevant Government Department. The information you requested falls, in lity of the Department of Education, Employment and Workplace Relations red that anyone requesting information agree, in writing, to the following be issued.
<ol> <li>Adhere to all the relevant le including the Information P Amendment (Private Secto Security (Administration) A access to and use of these</li> <li>Use the data only for the st</li> <li>Provide a copy of any finding to DEEWR at least 4 weeks</li> <li>Modify such findings, report</li> </ol>	ated purposes of the request ngs, reports, publications etc. that include or are based on the provided data
Please provide written consent:	

The fo these - By ac	Offered  Illowing selection has been put together from the information requirements are as you requested.  Idding extra payment types, customer details and dates	nation you have already provided, could you please check that a may change the cost.
Payment Types	Category 1  FaHCSIA Bereavement Allowance Disability Support Pension Widow B Pension Wife Pension (Age) Wife Pension (DSP) Commonwealth Seniors Health Care Card Health Care Card Pensioner Concession Card Low Income Card  DEEWR Austudy Newstart Allowance Parenting Payment Partnered Parenting Payment Single Partner Allowance Sickness Allowance Widow Allowance Youth Allowance	Category 2  FaHCSIA Age Pension Baby Bonus Carer Allowance Carer Payment Crisis Payment Double Orphan Pension Family Tax Benefit Part A Family Tax Benefit Part B Pharmaceutical Allowance Rent Assistance Seniors Concession Allowance (currently unavailable) Special Benefit Telephone Allowance Utilities Allowance (currently unavailable) Community Development Employment Programs (CDEP)  DEEWR Abstudy Assistance for Isolated Children Child Care Benefit Mobility Allowance  DAFF Exceptional Circumstances Relief Payment Farm Help
Customer Details	Variables  Age or Age Group Gender Marital Status Country of Birth Indigenous Status Other	Special Requirements (Please define the Variables further)
Demograp hics	☐ By State(s) / Territories ☐ By Postcode(s) ☐ By Area / CSC ☐ By LGA / SLA ☐ Point in Time ☐ Other	
Other	Requirements:	