



Australian Government

Department of Home Affairs

# Request for international movement records

Form

1359

Important – Please read this information carefully before you complete your request. Once you have completed your request we strongly advise that you keep a copy for your records.

## Who should complete this request

Complete this request if you are seeking:

- your own international movements record(s) (where the request includes records after 1981);
- another person's international movements record(s) (where the request includes records after 1981) AND you have their written authorisation.

If you require movements records prior to 1981 please contact the National Australian Archives [www.naa.gov.au](http://www.naa.gov.au)

## Proof of identity

All requests should attach a scanned colour copy or a certified copy of a photographic identity document, such as a passport or drivers licence. Certified copies are stamped as being true copies of the original by an authorised person.

An authorised person includes a solicitor, migration agent, Justice of the Peace or a Commonwealth Public Servant with 5 years service.

## Can another person make a request on your behalf?

If you ask another person, such as a solicitor or migration agent to make a request on your behalf, you will need to provide written authority, by completing Part C, allowing that person to act on your behalf. The Department of Home Affairs (the Department) can contact that person about your request and send that person your documents.

If you change your solicitor or migration agent, it is important that you advise the Department. If you nominate a solicitor or migration agent to act on your behalf, the documents will be sent to that person.

## Are you seeking information about another person?

To assist the Department in providing information about another person to you, you should seek that person's written consent at Part C. As the applicant your details will need to be provided at Part A, and Part B should be completed with details of the movement information you are seeking for the named person at Part C. Both parties must provide scanned colour copies or certified copies of the photographic identity.

## Where to submit the request

Requests should be emailed to [request.movement@homeaffairs.gov.au](mailto:request.movement@homeaffairs.gov.au) for records after 1981.

If you are living overseas, send it to the closest Australian mission. These offices will arrange for your request to be processed. For international movement records before 1981, please contact the National Australian Archives [www.naa.gov.au](http://www.naa.gov.au)

## Document checklist

Please ensure all required documents are submitted with your request. See *Part E – Checklist*.

## Important information about privacy

Your personal information is protected by law, including the *Privacy Act 1988*. Important information about the collection, use and disclosure (to other agencies and third parties, including overseas entities) of your personal information, including sensitive information, is contained in form 1442i *Privacy notice*. Form 1442i is available from the Department's website [www.homeaffairs.gov.au/allforms/](http://www.homeaffairs.gov.au/allforms/) or offices of the Department. You should ensure that you read and understand form 1442i before completing this form.

## Compliments and complaints

Your compliments, complaints and suggestions are valuable to the Department and will improve our products and services. To provide compliments or complaints about any of the Department's services, telephone the Global Feedback Unit on **133 177** (toll free in Australia) during business hours, visit the Department's website [www.homeaffairs.gov.au](http://www.homeaffairs.gov.au) or contact the Department directly at your nearest office or Australian mission overseas.

## The Ombudsman

If you are not happy with how the Department has handled your complaint you can contact the Commonwealth Ombudsman:

Telephone 1300 362 072 (local call charge) 9am to 5pm, Monday to Friday

Email [ombudsman@ombudsman.gov.au](mailto:ombudsman@ombudsman.gov.au)

Home page [www.homeaffairs.gov.au](http://www.homeaffairs.gov.au)

General enquiry line

Telephone **131 881** during business hours in Australia to speak to an operator (recorded information available outside these hours). If you are outside Australia, please contact your nearest Australian mission.

*Please keep this information page for your reference*

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Please open this form using Adobe Acrobat Reader.  
Either type (in English) in the fields provided or print this form  
and complete it (in English) using a pen and BLOCK LETTERS.

Tick where applicable

We strongly advise that you keep a copy of your request and  
all attachments for your records.

## Request details

**1** What type of request is this?

Personal application  Complete **Part A, Part B** and  
**Part E**

Third party seeking another  
person's information  Complete **Part A** with your details,  
**Part B** and **Part C** with details of  
the person whose movements you  
are seeking, and **Part E**

Parent requesting  
movement records for your  
child under 18 years of age  Complete **Part A** with your details,  
**Part D** with your child's details,  
and **Part E**

## Part A – Your details

The information given in Part A should contain details of the person  
making the request.

**2** Title Mr  Mrs  Miss  Ms   
Other

**3** Full name  
Family name   
Given names

**4** Your postal address (within Australia only)  
  
  
 POSTCODE

**5** Your telephone numbers  
Office hours  (AREA CODE )  
After hours  (AREA CODE )  
Mobile/cell

**6** Do you agree to the Department communicating with you by fax or email?

No   
Yes  Give details

Fax number  (AREA CODE )

Email address

**7** Your  
signature

Date  DAY MONTH YEAR

**Note:** You **must** attach a scanned colour copy or certified proof of  
identity.

## Part B – Details of movement records

The information given in Part B should contain details of whom the  
international movement request is for. That is either the applicant at  
Part A or the third party named at Part C.

**8** Details of whom the international movement request is for

Family name

Given names

Date of birth  DAY MONTH YEAR

Sex Male  Female

**9** Details from passport

Passport number

Country of  
passport

Date of issue  DAY MONTH YEAR

Date of expiry  DAY MONTH YEAR

Issuing authority/  
Place of issue as  
shown in your  
passport

**10** Have you been known by any other names?  
(including name at birth, previous married names, aliases)

No   
Yes  Give details

Family name

Given names

Date of name  
change  DAY MONTH YEAR

**11** Information about arrival/departure

Date range of movements required

from 

|     |       |      |
|-----|-------|------|
| DAY | MONTH | YEAR |
| /   | /     |      |

 to 

|     |       |      |
|-----|-------|------|
| DAY | MONTH | YEAR |
| /   | /     |      |

**12** Were you born in Australia?

No  Date of first arrival 

|     |       |      |
|-----|-------|------|
| DAY | MONTH | YEAR |
| /   | /     |      |

Yes  Date of first international movement 

|     |       |      |
|-----|-------|------|
| DAY | MONTH | YEAR |
| /   | /     |      |

**13** Did you arrive in Australia as a child with your parent(s)/family members?

No

Yes  Give details

1. Family name

Given names

Date of birth 

|     |       |      |
|-----|-------|------|
| DAY | MONTH | YEAR |
| /   | /     |      |

2. Family name

Given names

Date of birth 

|     |       |      |
|-----|-------|------|
| DAY | MONTH | YEAR |
| /   | /     |      |

**14** Why do you require the movement records?

**Part C – Consent for agent/third party to act**

**15** Are you requesting movement records for another person (person described in Part B)?

No  **Go to Part D**

Yes  Please have them complete the authorisation below

Family name

Given names

Date of birth 

|     |       |      |
|-----|-------|------|
| DAY | MONTH | YEAR |
| /   | /     |      |

Address   
  
POSTCODE

Telephone 

|              |           |        |
|--------------|-----------|--------|
| COUNTRY CODE | AREA CODE | NUMBER |
| (     )      | (     )   |        |

whose signature appears below, authorise the person whose details appear in Part A to obtain access to the document(s) described in Part B.

**Signature of person in Part B**

Date 

|     |       |      |
|-----|-------|------|
| DAY | MONTH | YEAR |
| /   | /     |      |

**Signature of person in Part A**

Date 

|     |       |      |
|-----|-------|------|
| DAY | MONTH | YEAR |
| /   | /     |      |

**Note:** Both parties must attach a scanned colour copy or certified proof of identity.

## Part D – Children under the age of 18 years

**16** Are you requesting documents about child(ren), under the age of 18 years, in your role as parent or guardian?

No

Yes  Provide details of the child (read and sign the statement below if applicable)

Child's full name

Family name

Given names

Date of birth  DAY MONTH YEAR / /

*If there is insufficient space, attach details on a separate sheet*

**17** Information about arrival/departure

Date range of movements required

from  DAY MONTH YEAR / / to  DAY MONTH YEAR / /

**OR**

1. Date of arrival/ departure (if known)  DAY MONTH YEAR / /  
 Name of ship/airline   
 Port of arrival/departure

2. Date of arrival/ departure (if known)  DAY MONTH YEAR / /  
 Name of ship/airline   
 Port of arrival/departure

3. Date of arrival/ departure (if known)  DAY MONTH YEAR / /  
 Name of ship/airline   
 Port of arrival/departure

*If there is insufficient space, attach details on a separate sheet*

**Note:** Parent/Guardian must provide a scanned colour copy or certified copy of birth certificate for child/children.

**18** Why do you require the movement records?

**19 WARNING:** Giving false or misleading information is a serious offence.

I certify that there are no orders:

- restricting my access to these documents; or
- giving parental responsibility for the child named in this request to another person.

**Your signature**

Date  DAY MONTH YEAR / /

## Part E – Checklist

**20** Please attach a scanned colour copy or certified copy of the following documents to this request.

| Question | Document   | Attached                 |
|----------|--|--------------------------|
| 7        | Proof of your identity   | <input type="checkbox"/> |
| 10       | Change of name document (if applicable)                                  | <input type="checkbox"/> |
| 15       | Proof of identity for the other person (if applicable)                   | <input type="checkbox"/> |
| 17       | Birth certificate(s) of child(ren) under 18 years of age (if applicable) | <input type="checkbox"/> |

### Office use only

Copy and certify client's photo identification

Documents located and issued to client (letter attached)

Documents not located, client advised (letter attached)

Request sent to MR & Pax Cards for action

Request note created in ICSE

Name of client service officer

Contact details

Address

POSTCODE

Telephone number (AREA CODE )

Email address

Date  DAY MONTH YEAR / /

Additional comments (ie. priority or known urgency)