



**AFP Criminal Records – Disputed Record Form CR 1200**

**Please complete this form in black ink using CAPITAL LETTERS.**

**A. Applicant details:**

<b>Current Family Name</b>			
<b>Given Names</b>			
<b>Date of Birth</b>	/	/	<b>AFP reference if known</b>
<b>ADDRESS</b>			<b>Day time contact number</b>

**B. Criminal record information in dispute:**

Please outline the reasons for disputing your criminal record. Include sufficient information and supporting documents to enable the AFP to assess your application. Information must include details of the offences and/or information in dispute including arrest name, court, court date and outcome. AFP may require comparison fingerprints to resolve some disputes (applicants will be notified in such instances). Add additional pages if necessary.

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**Signature..... Date / /**

**Completed applications should be mailed to:**  
AFP Criminal Records, Client Services Team, Locked Bag 8550, CANBERRA ACT 2601

For any queries phone Criminal Records on 02 6202 3333.