

### **Facilitation and Assistance** Request Form

Free Call 1800 663 693 **Brisbane** 07 3224 1200 Mount Isa 07 4743 1322

Level 10, 307 Queen Street Brisbane QLD 4000

**Brisbane Office** 

Mount Isa 31-33 Commercial Road Mount Isa QLD 4825

Email reception@gsnts.com.au PO Box 10832, Adelaide Street Web www.qsnts.com.au

Brisbane QLD 4001

PO Box 1948 Mount Isa QLD 4825

If you would like more information or help with completing this form, please contact QSNTS at the details above. Completed forms can be submitted to QSNTS by email, post or in person at our offices in Brisbane and Mt Isa.

### Part 1: Introduction

QSNTS' Policies and Procedures Relating to Performance of Functions under Part 11, Division 3 Native Title Act 1993 (Cth) (NTA) are available on the QSNTS website at www.qsnts.com.au.

It is important to know that:

- QSNTS may not perform its facilitation and assistance functions under s 203BB of the NTA unless it is requested to do so; and
- QSNTS facilitation and assistance functions are only available in relation to a matter that is within:
  - QSNTS' service region; and 0
  - The scope of QSNTS' statutory functions. 0

Section 203BB(1) of the NTA states that the facilitation and assistance functions of a representative body are:

- to research and prepare native title applications, and to facilitate research into, preparation of and making of native title applications; and
- to assist Registered Native Title Bodies Corporate (PBCs), native title holders and b) persons who may hold native title (including by representing them or facilitating their representation) in consultations, mediations, negotiations and proceedings relating to the following:
  - i. native title applications;
  - ii. future acts:
  - ILUAs or other agreements in relation to native title; iii.
  - rights of access conferred under this Act or otherwise; and iv.
  - any other matters relating to native title or to the operation of this Act.

Once your request is submitted, you will receive acknowledgement in writing from QSNTS that it has been received.

Your request will be assessed, and the Chief Executive Officer (CEO) of QSNTS will make a decision on whether the requested assistance can be provided. Please refer to Attachment A for a flowchart outlining the QSNTS s 203BB Facilitation and Assistance Requests procedure.

You will be informed in writing of the CEO's decision.



## Part 2: Application for Assistance

ii itailio di pord	on(s) or PBC requesting assistance:
2. Contact detai	Is of person(s) or PBC requesting assistance:
Phone:	
Email:	
Postal address:	
3. Name of grou	p on whose behalf assistance is requested:
4. Description o	f assistance requested:
Please provide a	description of the assistance you are requesting and the reason you are se attach additional pages if you need to.
Please provide a	description of the assistance you are requesting and the reason you are
Please provide a	description of the assistance you are requesting and the reason you are
Please provide a	description of the assistance you are requesting and the reason you are
Please provide a	description of the assistance you are requesting and the reason you are
Please provide a	description of the assistance you are requesting and the reason you are
Please provide a	description of the assistance you are requesting and the reason you are
Please provide a	description of the assistance you are requesting and the reason you are
Please provide a	description of the assistance you are requesting and the reason you are
Please provide a	description of the assistance you are requesting and the reason you are
Please provide a	description of the assistance you are requesting and the reason you are
Please provide a	description of the assistance you are requesting and the reason you are
Please provide a	description of the assistance you are requesting and the reason you are
Please provide a	description of the assistance you are requesting and the reason you are
Please provide a	description of the assistance you are requesting and the reason you are



5. Area to which your request relates:					
Please provide a description of the geographical area to which your request relates. If possible, please also provide a map of the area. The <b>National Native Title Tribunal</b> may be able to provide you with assistance in the preparation of maps and descriptions.					
6. Previous native title claim(s):					
Has the group (or a section of it) already or previously filed a native title claim or claims?		Yes No			
If <b>yes</b> , please attach a copy of the <i>Extract from Register of Native Title Applications</i> available from the National Native Title Tribunal (nntt.gov.au)					
Application name:					
Federal Court file number:					
Tribunal file number:					
Date filed:					
Application status:					
7. Previous assistance from QSNTS:					
Have you requested assistance and/or funding from QSNTS		Yes			
previously, successfully or otherwise?		No			
		110			
If <b>yes</b> , please provide a brief description of your previous request(s) to QSNTS and/or assistance which has been provided by QSNTS previously:					



8. Previous assistance from others:		
Have you previously engaged other legal representation, or received advice or assistance with your matter from anyone else?		Yes No
If <b>yes</b> , please provide a brief description of the assistance you provided, and the person(s) who have assisted you:	have prev	viously been
9. Other claimants:		
Are there any other Aboriginal people or groups that you		V
		Yes
know of who might have, or claim to have, native title rights or interests in the area subject to your request for assistance?		No
or interests in the area subject to your request for		se people or
or interests in the area subject to your request for assistance?  If <b>yes</b> , please indicate whether you have discussed your matter.		se people or
or interests in the area subject to your request for assistance?  If <b>yes</b> , please indicate whether you have discussed your matter.		se people or
or interests in the area subject to your request for assistance?  If <b>yes</b> , please indicate whether you have discussed your matter.		se people or
or interests in the area subject to your request for assistance?  If <b>yes</b> , please indicate whether you have discussed your matter.		se people or
or interests in the area subject to your request for assistance?  If <b>yes</b> , please indicate whether you have discussed your matter.		se people or
or interests in the area subject to your request for assistance?  If <b>yes</b> , please indicate whether you have discussed your matter.		se people or
or interests in the area subject to your request for assistance?  If <b>yes</b> , please indicate whether you have discussed your matter.		se people or
or interests in the area subject to your request for assistance?  If <b>yes</b> , please indicate whether you have discussed your matter.		se people or
or interests in the area subject to your request for assistance?  If <b>yes</b> , please indicate whether you have discussed your matter.		se people or
or interests in the area subject to your request for assistance?  If <b>yes</b> , please indicate whether you have discussed your matter.		se people or



#### 10. Statement of person(s) requesting assistance:

- I/We confirm that the information in this application is, to the best of my/our knowledge, complete, true and correct.
- I/We agree to QSNTS requesting further information if necessary for the purposes of assessing this application.
- I/We understand that in assessing the request QSNTS may consider material in its possession that is relevant to the request.
- I/We understand that by accepting and assessing this application, QSNTS does not necessarily agree to provide the assistance requested.

Any further comments:				
Name	Signature	Date		
Name	Signature	Date		



# Attachment A: The QSNTS s 203BB Facilitation and Assistance Requests Procedure

A **Facilitation and Assistance Request Form** is completed and sent to QSNTS by post, e-mail or in person.

The request for assistance is acknowledged in writing by QSNTS, and a timeframe is provided for a decision to be made.

## Request for assistance

QSNTS can only perform its s 203BB facilitation and assistance functions:

- When asked to do so:
- Within its region of responsibility; and
- Within the scope of its statutory functions.

The CEO will consider and prioritise each request for assistance\*.

# Assessment of request

Generally, requests that relate to matters or issues that are not already part of the QSNTS Operational Plan will require a separate funding application to the National Indigenous Advancement Agency (NIAA) \*.

The person(s) requesting assistance will be informed in writing of the CEO's decision:

# Outcome of request

If the CEO accepts the request, the requestor will be informed of the terms and conditions (if any) of the assistance to be provided.

If the CEO declines or briefs out the request, clear reasons for this are provided. The requestor is entitled to seek an internal review of the decision.

## Provision of assistance

Assistance that involves the allocation of a lawyer (employed by QSNTS or otherwise) is provided on the basis that the person(s) receiving assistance consents to that lawyer communicating with the QSNTS Executive about the matter.

No member of the QSNTS Executive who has (or could be perceived as having) a conflict of interest will receive information about the matter.

<sup>\*</sup> The criteria applied to assessing requests for assistance is outlined in QSNTS's Policies and Procedures
Relating to Performance of Functions under Part 11, Division 3 Native Title Act 1993 (Cth).