



**Murray Valley Aboriginal  
Co-operative Limited**  
*Supporting Our Community*

## CONFIRMATION OF ABORIGINALITY / TORRES STRAIT ISLANDER DESCENT

**Name of  
Applicant:**

\_\_\_\_\_

**Address of  
Applicant:**

\_\_\_\_\_

**Date of Birth:**

\_\_\_\_\_

**Mothers Name:**

\_\_\_\_\_

**Fathers Name:**

\_\_\_\_\_

**Applicants Signature:**

\_\_\_\_\_

It is here by confirmed that the above named applicant is an Aboriginal Person / or Torres Strait Islander Person

1. descent, identifies as an Aboriginal Person or Torres Strait Islander Person
2. is accepted as such by the Robinvale Indigenous Community in which he / she lives.

\*Circle whichever is not applicable.

\_\_\_\_\_  
Signature:

(MVAC'S Common Seal)  
(To be affixed)

\_\_\_\_\_  
Director:

\_\_\_\_\_  
Signature:

\_\_\_\_\_  
Director:

\_\_\_\_\_  
Signature:

\_\_\_\_\_  
Director:

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