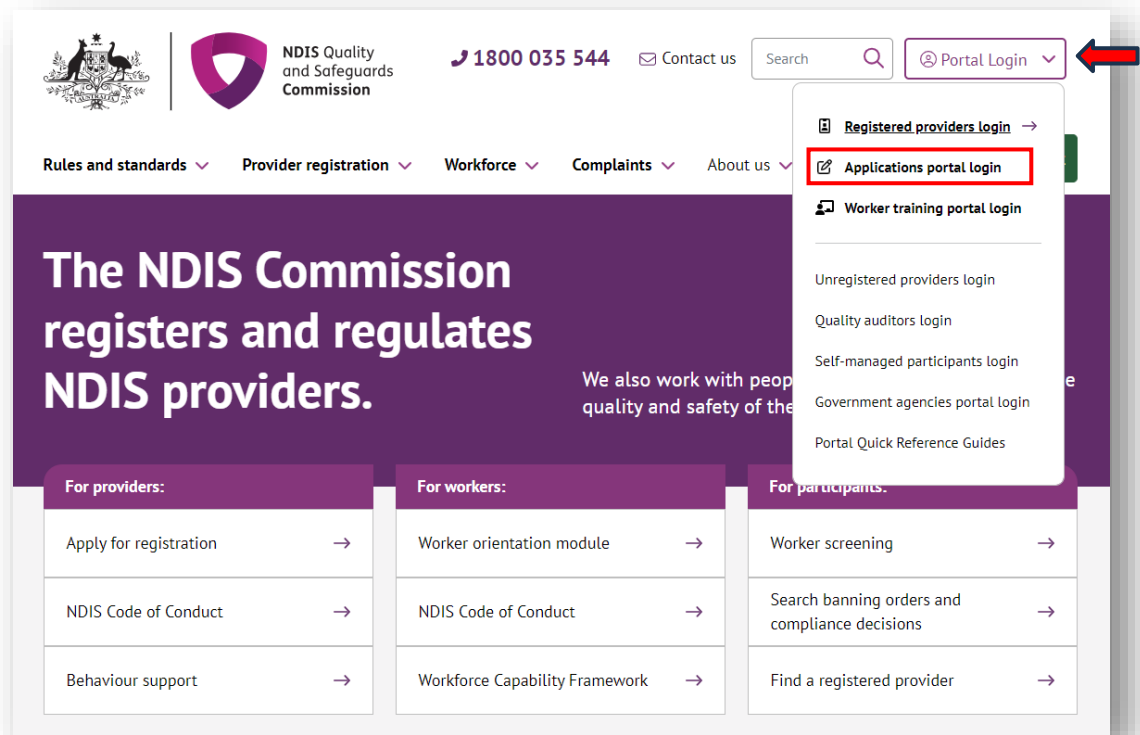
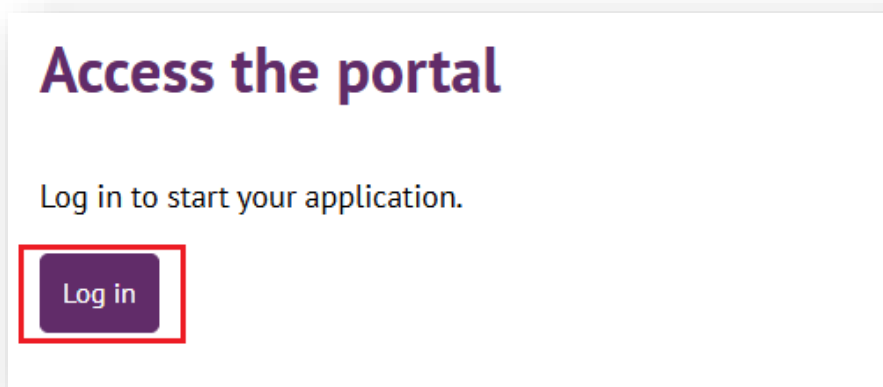


Apply for access to the Database (NWSD)

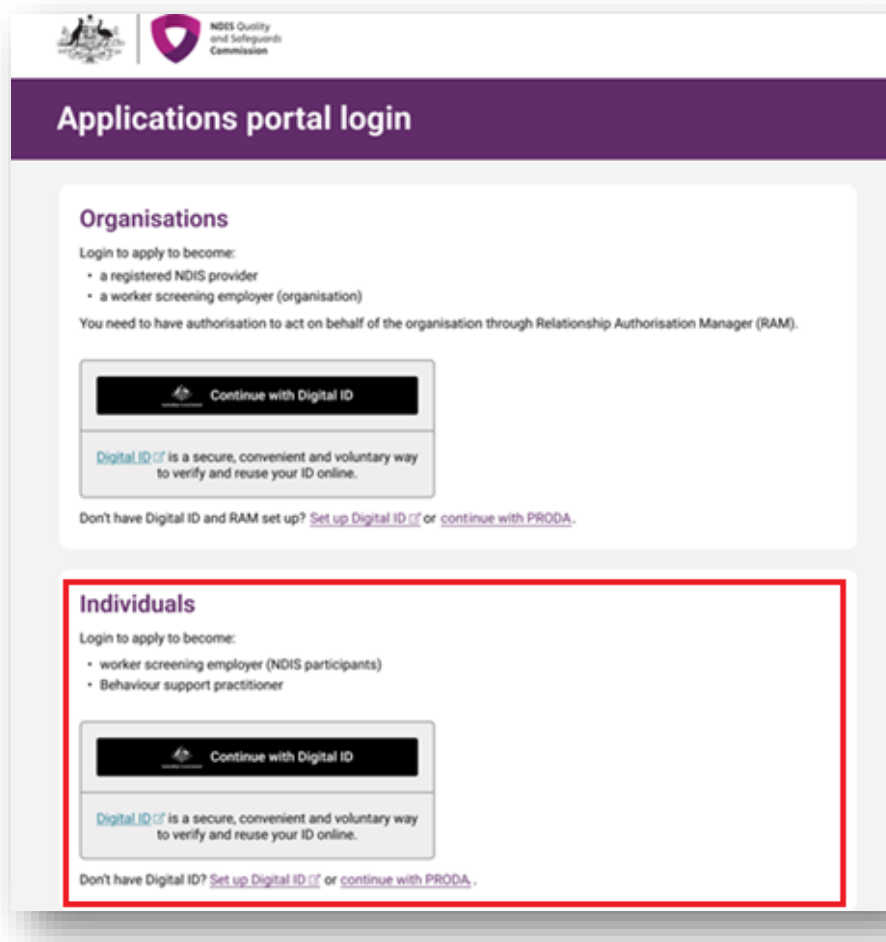
1. To obtain access to the NWSD, navigate to the Commission's website at www.ndiscommission.gov.au.
2. Navigate to **Portal Login > Applications portal login**.



3. Once you get to the Applications Portal webpage, click **Login**

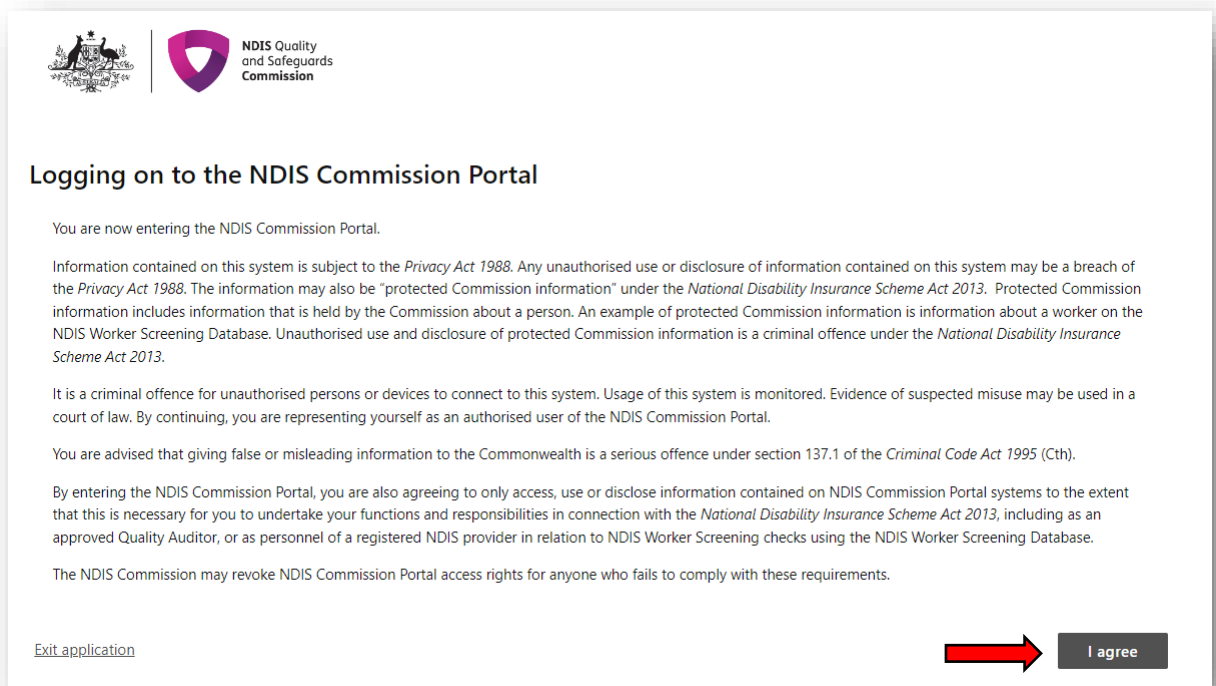


4. You can log in to the Applications Portal by clicking either **Login to PRODA** or **Continue with Digital ID**. If you do not have a **PRODA** account or **Digital ID** account, please create one before proceeding.



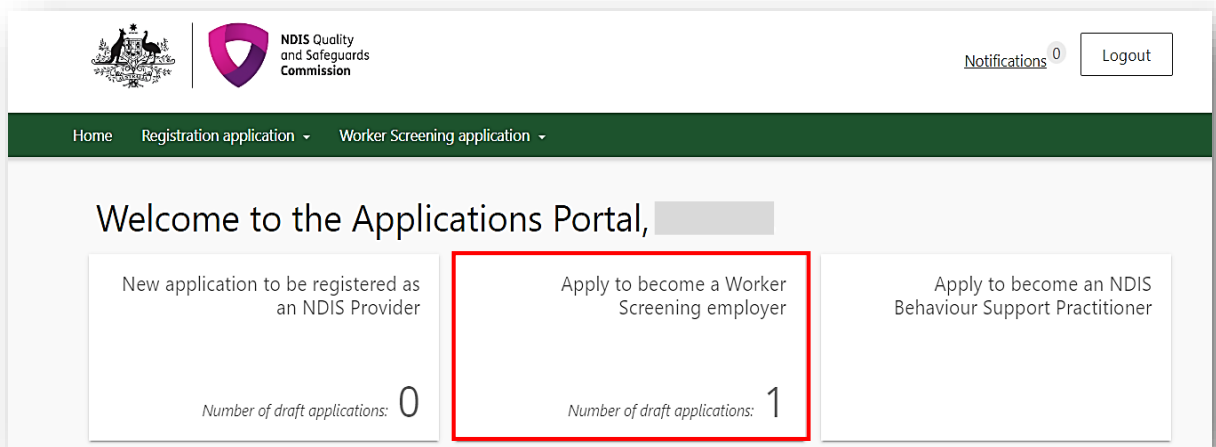
5. After selecting the **Application Portal** and entering the required information. Once submitted, you will receive an email to confirm your email address with instructions on how to proceed with your application.

6. Read the **Applications Portal** conditions, and click **I agree**.



The screenshot shows the 'Logging on to the NDIS Commission Portal' page. At the top left are the Australian Coat of Arms and the NDIS Quality and Safeguards Commission logo. The main heading is 'Logging on to the NDIS Commission Portal'. Below this, there are several paragraphs of text regarding privacy, unauthorised access, and the consequences of providing false information. At the bottom left is a link for 'Exit application'. At the bottom right is a dark grey button labeled 'I agree', with a red arrow pointing to it from the left.

7. As a NDIS Participant seeking access to the NWSD, select the tile **Apply to become a Worker Screening employer**.



The screenshot shows the 'Applications Portal' dashboard. At the top left are the Australian Coat of Arms and the NDIS Quality and Safeguards Commission logo. On the top right, there is a 'Notifications' link with a '0' and a 'Logout' button. Below this is a navigation bar with 'Home', 'Registration application', and 'Worker Screening application'. The main heading is 'Welcome to the Applications Portal, [redacted]'. Below this are three tiles. The first tile is 'New application to be registered as an NDIS Provider' with 'Number of draft applications: 0'. The second tile, 'Apply to become a Worker Screening employer', is highlighted with a red border and has 'Number of draft applications: 1'. The third tile is 'Apply to become an NDIS Behaviour Support Practitioner'.

REMINDER: This is not an application for a NDIS Worker Screening Check.

8. Click **Start new application** to become a Worker Screening **Employer** to verify and link workers in the **NWSD**.

Home Registration application Worker Screening application

Apply to become a Worker Screening employer

This is not an application for an NDIS Worker Screening Check. If you are a worker, to apply for an NDIS Worker Screening Check contact the [relevant state or territory agency](#).

The NDIS Worker Screening Check is a national check that can be used to screen a person who works or seeks to work with NDIS Participants. The NDIS Worker Screening Check will assess whether the person poses an unacceptable risk to people with disability. It is an important tool that can be used to support recruitment, selection and screening processes.

A Worker Screening employer is an Organisation or NDIS Participant in the disability sector that engages a worker's services.

By becoming a Worker Screening employer:

- Your workers will be able to nominate the Organisation or NDIS Participant as an employer when they apply for the NDIS Worker Screening Check
- You will be able to verify whether these workers currently work or intend to work for you (verifying a worker progresses their application to be screened)
- You will be able to link to your workers to view their current Worker Screening status and eligibility to work with people with disability.

Start an application to become a Worker Screening employer, if you are an:

- NDIS Participant or their representative
- Authorised representative of an Organisation in the disability sector.


If an application has already been started or completed, then you may link to the application.

Note for Registered NDIS Providers: Registered NDIS Providers are automatically considered Worker Screening employers and won't need to complete this application. People authorised to represent a Registered NDIS Provider can login to the [NDIS Commission Portal](#) to access Worker Screening functionality on behalf of their Organisation. You should logout of this portal before logging into the NDIS Commission Portal.

Things to consider for this application:

- Applications you start or link to will be listed below so you can access them later.
- Each time you open the application the expiry date will be extended by 60 days from today's date. Ensure you submit this application by the expiry date otherwise it may be deleted.

Information on Worker Screening and becoming a Worker Screening employer can be found on the [NDIS Commission website](#).

 **Start new application** **Link to application**

9. To continue, select **NDIS Participant** and select which option applies to how your plan is managed.

Apply to become a Worker Screening employer, if you are an:


- 'NDIS Participant' or their representative
- An authorised representative of an 'Organisation' in the disability sector.

Start an application for an:*

Organisation **NDIS Participant**

How do you manage your NDIS plan? (Select all that apply)*

Agency-managed Plan-managed Self-managed

[Discard changes and return](#)  **Continue**

10. Provide the **Participant's** details. (if this is incorrect the application will be withdrawn)
Please ensure the following **Participant** details are correct and click **Continue**.

Applicant details * required

For the purpose of this application, the 'Applicant' is the NDIS Participant. If the application is approved, the NDIS Participant will become a Worker Screening employer.

NDIS Participant details

Title:*


First name:* ●
Middle name:
Last name:*

NDIS number:*
Gender:*
Date of birth:* dd/mm/yyyy

NDIS Participant contact details

Any emails related to Worker Screening will automatically be sent to the email address recorded.

Email address:*
Phone number:*

[Discard changes and return](#)  **Continue**

11. Ensure you have read and understand the **Initial declaration** before proceeding. Provide the **same email address** that you have been using for **PRODA** or **Digital ID**. In the **application**. Click **I agree and continue** once complete.

Entering the application * required

Initial declaration


I declare:

- I am the Applicant or have the authority to act on behalf of the NDIS Participant or Organisation for this application.
- I acknowledge that I will be linked to this application.
- I acknowledge the application will be available from the 'Apply to become a Worker Screening employer' page.
- I acknowledge that my name and email address will be recorded on the application.
- My agreement to the [Worker Screening Privacy Collection Statement](#) [↗](#) which is available on the NDIS Commission website.
- I acknowledge that the NDIS Quality and Safeguards Commission (NDIS Commission) may revoke system or application access rights for anyone who fails to comply with the [user access responsibilities](#) [↗](#)

By selecting 'I agree and continue', you are stating that you understand and agree to the above declaration. You will then be linked to the application.

If you disagree with this declaration, then you will not receive access or be linked to the application. Any information entered will be discarded.

My email address:*

[I disagree and discard](#)  **I agree and continue**

12. On the left-hand side of the screen, the orange-coloured dot lets you see the part of the form that **requires action** before you can proceed to the next page.

Once you have completed this section, select **Save and continue** then **Mark as Complete**. This will provide you with a green tick indicating that this section is complete.

Worker Screening application

Application reference number: [Redacted]
Application status: Draft
NDIS Participant's name: [Redacted]
NDIS number: [Redacted]
Expiry date: 29/08/2025
Application type: Participant Worker Screening

Application details

- Application information**
- Participant details**
Complete
- Key contacts**
Available
- Workers**
Available
- Declaration**
Unavailable

Application information

How to complete this application

For the purpose of this application, the 'Applicant' is the NDIS Participant. If the application is approved, the NDIS Participant will become a Worker Screening employer.

Ensure you submit this application by the expiry date otherwise it may be deleted. You can return to this application any time during this period. Each time you open this application the expiry date will be extended by 60 days from today's date.

- Use the left navigation menu as a guide of progress.
- You can access this page as well as any 'Available' and 'Completed' pages in the left navigation.
- Complete any 'Available' sections. Once you've completed a section and confirmed the information provided is true, correct and accurate, mark it as complete and continue to the next page.

You will be able to submit this application once you have completed all the relevant pages. Please be aware that your application is considered a draft until it is completed and submitted. After submission, you will be able to download a copy of your completed application.

You can withdraw this application while it is 'Draft' or 'Submitted'. However you won't be able to withdraw it once the NDIS Commission has assessed it.

[Withdraw application](#)

Application created date: dd/mm/yyyy hh:mm
19/07/2024 01:37:21 PM

Application expiry date: dd/mm/yyyy
29/08/2025

Sharing this application

Provide the below details to anyone who requires access and needs to edit this application.

NDIS number: [Redacted] Application reference number: [Redacted]

13. The person/s listed here is either, the **participant** completing the application or the **nominee** on behalf of the participant. If no changes are required, please select **Mark as complete and continue**. If the information is **incorrect or not populated**, please select **Add** and provide the correct contact information.

- Being a nominee means that the NDIS Commission can speak to you on behalf of the participant. This person will have access to manage workers, update details and receive messages on behalf of the Participant.
- If participant is not the primary contact, please do NOT tick make primary contact instead, click Add and enter nominee details.

Worker Screening application

Application reference number:

Application status: Draft

NDIS Participant's name:

NDIS number:

Expiry date: 29/08/2025

Application type: Participant Worker Screening

Application details

Application information

Participant details
Complete ✔

Key contacts
Available ●

Workers
Available ●

Declaration
Unavailable 🔒

Key contacts

How to complete this page

1. List the key contacts for the Applicant.
2. Then, nominate one person to be the 'Primary' contact by selecting 'Actions'. The NDIS Participant or one of the key contacts listed may be the primary contact. Select one person to be the 'primary' contact by selecting 'Actions' then 'Make primary'.

Ensure each individual listed has read and understood the [Worker Screening Privacy Collection Statement](#), and consent to their personal information being used and disclosed for the purposes described in the Statement.

About the primary contact

Subject to the NDIS Commission's approval, the primary contact will be provided with access to the Employer Portal on behalf of the NDIS Participant.

They will be:

- considered the primary point of contact,
- able to verify whether a worker is currently working, or intends to work for the participant,
- able to verify a worker's application for an NDIS Worker Screening Check so that it progresses for screening, and
- able to manage the participant's workers.

The primary contact will also receive the 'Access Delegate' role in the system. The Access Delegate is responsible for:

- the NDIS Participant's account, and
- managing user access to the Employer Portal on behalf of the NDIS Participant. This includes adding and removing someone's access to the portal.

Ensure the primary contact has read, understood and agrees to abide by the [user access responsibilities](#).

Confirm the primary contact's details

The following details will be used to provide the primary contact access to the Employer Portal on behalf of the NDIS Participant. **For the primary contact, double check that you have listed:**

- Their current legal name, as shown on their identity documents
- The correct email address and phone number.

NDIS Participant

Primary:

First name:

Last name:

Email address:

Phone number:

Contacts

Primary	First Name	Last Name	Email address	Phone number	Status
<div style="float: right; text-align: right;"><input type="button" value="Actions"/></div>					

Select Format, Press Export, and Save Download

Format:

14. If you have a worker's Worker Screening ID and you wish to add them, please do so and select **Mark as complete**. If you currently have no workers, please leave this section blank and select

Mark as complete and continue


Worker Screening application

Application reference number: [redacted]
Application status: Draft
NDIS Participant's name: [redacted]
NDIS number: [redacted]
Expiry date: [redacted]
Application type: Participant Worker Screening


Workers

Workers include employees, volunteers and contractors the Applicant engages to deliver NDIS supports/services for a participant.

Add workers that have applied for the NDIS Worker Screening Check. If none have applied then you may skip this section.

 **Add**

There are no workers recorded.

 **Mark as complete and continue**

15. Ensure that the **primary contact** information included here is the same as the **primary contact** entered in the key contacts section. Please take a note of the Application reference number (**4-XXXXXXX**) in the top left corner of the screen.

Worker Screening application

Application reference number: [redacted]
Application status: Draft
NDIS Participant's name: [redacted]
NDIS number: [redacted]
Expiry date: [redacted]
Application type: Participant Worker Screening

Declaration

The primary contact

The person identified below has been nominated to be the primary contact (on the 'Key contacts' page). Please ensure they have the authority to act on behalf of the Applicant. They will be the main point of contact following submission.

Subject to the NDIS Commission's approval, the Primary contact will be able to access the Employer Portal on behalf of the NDIS Participant. They will then be able to give additional user access to the portal on behalf of the NDIS Participant.

Confirm these details are correct and ensure that you have listed:

- Their current legal name, as shown on their identity documents, and
- The correct email address and phone number

If these details are incorrect, or if another person should be the primary contact, then navigate to 'Key contacts' and update the primary contact.

First name: [redacted] Last name: [redacted]

Email address: [redacted] Phone number: [redacted]

16. Ensure you read and understand the **declaration** before submitting the application. If you have any further questions, please quote the Reference Number (**4-XXXXXXX**) in any emails you send

to the NDIS Commission. You can then select **submit the application**.

Declaration Available

I declare that:

- I am the NDIS Participant identified below or I am authorised to act on behalf of the NDIS Participant identified below.

Privacy collection

- I understand that the information on this application is being collected by the NDIS Quality and Safeguards Commission (NDIS Commission) for the purposes set out in the [Worker Screening Privacy Collection Statement](#) (Statement).
- I have read and understood the Statement and consent to the NDIS Commission collecting, using and disclosing my personal information for the purposes and circumstances set out in that Statement, including for the purposes of the NDIS Commission undertaking statutory functions under the *National Disability Insurance Scheme Act 2013* (Cth).
- I have ensured that any other person whose personal information is included in this application has read and understood the Statement and they have also consented to their personal information being collected, used and disclosed by the NDIS Commission for the purposes and circumstances set out in that Statement, including for the purposes of the NDIS Commissioner undertaking statutory functions under the *National Disability Insurance Scheme Act 2013* (Cth).

User access responsibilities

- I have read, understood and agree to abide by the [user access responsibilities](#).


Accuracy of information

- To the best of my knowledge, the information provided in this application is true, correct and accurate.
- I understand and acknowledge that the giving of false or misleading information, knowing that the information is false or misleading, to the Commonwealth is a serious offence under section 137.1 of the schedule to the *Criminal Code Act 1995*.

By selecting 'Submit application', you are stating that you understand and agree to the above declaration.

NDIS Participant's name:

NDIS number:

 **Submit application**

17. Your application has now been **submitted** for assessment. If your application is successful, you will be notified by email to confirm and inform you of the next steps. If we identify an issue with your application, we will contact you by email.

Tip: Once your application has been **approved**, it will take up to 48 hours to be updated in the database.