## Nazareth College - School Community Safety Order Review Form





This form is to be completed by the subject of a School Community Safety Order (order) and/or relevant persons assisting the subject who wish to have a decision regarding an order reviewed.

This form must be received by the designated reviewer as soon as practicable after an order is issued.

It is important that you keep a copy of this form for your records.				
School Information				
School name:				
Principal:				
Authorised person				
Student Information	n			
Name:				
Date of birth:				
Gender:				
Year level:				
Subject Information	า			
Name:				
Address:				
Phone:	Email:			
Support needs:	Do you require any specific assistance to participate in a meeting?			
Carer's/relevant pe	rson's Information			
Name:				
Date of birth:				
Phone:	Email:			

Incident Information			
Please provide brief details of the circumstances leading to the issuing of the order by the authorised person:			

Reason/s for Review		
There have not been suffici issue the order.	decision to	
		Yes/No
The grounds on which the o	order was issued are unfair	
The greatine on which the c	stadi waa laada ara aman.	Yes/No
Other extenuating circumsta	ances	
Other exteriorating off our for	anocs.	Yes/No
Outline the plane of the con-		
	ignature:	
Date:		
Responsible director	Director of Learning and Regional Services	
Policy owner	General Manager, Legal and Professional Standards	
Approving authority	Director, Learning and Regional Services	
Approval date	14 September 2022	
Date of next review	September 2024	