Emmaus Catholic Primary 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.

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School Information				
School name:				
Principal:				
Authorised person				
Student Information	on			
Name:				
Date of birth:				
Gender:				
Year level:				
Subject Informatio	n			
Name:				
Address:				
Phone:	Email:			
Support needs:	Do you require any specific assistance to participate in a meeting?			
Carer's/relevant po	erson'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 sufficient interventions/strategies utilised prior to the decision to issue order.		
order.		Yes/No
The grounds on which the	e order was issued are unfair.	Yes/No
		163/110
Other extenuating circumstances. Yes/No		
		163/110
Subject's signature:		
Carer's / relevant persons'	signature:	
Date:		
Responsible director	Director of Learning and Regional Services	
	General Manager, Legal and Professional Standards	
Approving authority	Director, Learning and Regional Services	
	14 September 2022	
Date of next review	September 2024	