

Emmaus College Community Safety Order Internal 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   | bn |
|----------------------|----|
| School name:         |    |
| Principal:           |    |
| Authorised<br>person |    |

| Student Informat | ion |
|------------------|-----|
| Name:            |     |
| Date of birth:   |     |
| Gender:          |     |
| Year level:      |     |

| Subject Information |   |        |  |  |  |
|---------------------|---|--------|--|--|--|
| Name:               |   |        |  |  |  |
| Address:            |   |        |  |  |  |
| Phone:              |   | Email: |  |  |  |
| Support needs:      | Do you require any specific assistance to participate in a meeting? |        |  |  |  |

| Carer's/relevant person'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 the order. |   |       |        |  |
|   |   | Y     | ′es/No |  |
|   |   |       |        |  |
| The grounds on which  | the order was issued are unfair.                  | Y     | ′es/No |  |
|   |   |       |        |  |
| Other extenuating circ  | umstances.  | Y     | ′es/No |  |
|   |   |       |        |  |
| NAME OF   |   |       |        |  |
| PARENT/GUARDIAN<br>/CARER/RELEVANT<br>PERSON:   | Signature:  | 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 Date of next review 14 September 2022

September 2024