St Joseph's School
School Community Safety Order Review Form

MELBOURNE ARCHDIOCESE CATHOLIC SCHOOLS

ST JOSEPH'S SCHOOL COLLINGWOOD

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	
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 to issue the order. Yes/No
The grounds on which the order was issued are unfair. Yes/No
Other extenuating circumstances. Yes/No

Subject's signature: _____

Carer's / relevant persons' signature: _____

Date: _____