Christ Holy Redeemer Primary School Community Safety Order



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 pe	erson's Information
Name:	
Date of birth:	
Phone:	Email:

Please provide brief o person:	etails of the circumstances leading to the issuing of the order by the authorised
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 whic	n the order was issued are unfair. Yes/No
Other extenuating cir	cumstances. Yes/No
	ons' signature:
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

Incident Information