

Appeal against a decision to suspend or expel a student from a NSW government school

Student's Name: _____

School attended: _____

Year or Grade: _____

Person making appeal: _____

Relationship to student: _____

Address: _____

Telephone numbers: (work) _____ (home) _____ (mobile) _____

Please attach a copy of the notification of suspension from the school.

This appeal is on the grounds that (please tick relevant box)

a. correct procedures have not been followed ☐ b. an unfair decision has been made ☐

MAJOR REASONS FOR APPEALING *(summary only)*

(You may attach supporting documents to this form. It is important that all matters which you wish considered in the appeal are mentioned.)

Signature of person making appeal: _____ Date: _____

Checklist:

Have you attached a copy of the notification? ☐ Have you attached additional information? ☐

Have you completed all information on the form? ☐ Have you signed the form? ☐

Please return this form, together with the attached information, to your regional office.