

ATTACHMENT B

**REQUEST TO REVIEW MATURE AGE STUDENT ENROLMENT
APPLICATION**

APPLICANT TO COMPLETE	
Applicant's details	Name:
	Date of birth: Current age:
	Phone: Email:
	Address:
School	
Reason for enrolment application	
Date application submitted	
Reason for request to review the principal's decision	
Outcome sought	
	I hereby give permission for the school principal to give details of my criminal record report and/or pending charges to other Department of Education employees involved in the review of my enrolment application.
Signature	
Date	

PRINCIPAL TO COMPLETE	
Checklist:	Attempt has been made to resolve the issue at the school level <input type="checkbox"/>
	Original enrolment application and proof of identity are attached <input type="checkbox"/>
	Copy of information received from vetting entity is attached <input type="checkbox"/>
	Copy of enrolment application refusal letter issued to applicant is attached <input type="checkbox"/>
	Memorandum to the Chief Executive is attached <input type="checkbox"/>

Checklist complete	/ / 20	Principal's name:
		Signature: