Application for internal review of special school enrolment ineligibility

How to request an internal review

1. As the applicant, you are entitled to seek a review if an application for enrolment at a special school has been refused.
2. If you are seeking an internal review of the decision to refuse enrolment at a state special school you must complete the attached *Application for internal review of special school enrolment ineligibilty* form and provide it to the Department of Education (the department) within 30 school days of being given the *Information notice – Requirements for enrolment in a state special school not satisfied* (Information Notice).
3. In order to properly assess your application for internal review, you should outline why you disagree with the decision to refuse enrolment and provide any additional information to support enrolment in a state special school.
4. It is desirable that your application includes additional information regarding:
5. your child’s educational needs
6. why you consider the special school to be the most appropriate program to meet these needs
7. any other relevant information you may choose.
8. You may ask other people not employed by the department (e.g. medical specialists/external therapists) to assist you in preparing a submission, or relevant departmental employees who were not involved in the original decision who are approved by the department to provide this support.
9. If you wish to provide more information verbally, a departmental officer can be made available to take notes and produce an agreed written record. To arrange this, please contact the Principal Education Officer, Student Services in the relevant region. Regional contact details can be accessed at [https://education.qld.gov.au/contact-us/state-schools-regional-contacts;](https://education.qld.gov.au/contact-us/state-schools-regional-contacts)
10. If more time is needed, you can contact the person listed on the Information Notice within 30 school days.
11. When considering your request, the departmental officer undertaking the internal review will consider the following requirements for enrolment in state special schools:
12. Whether your child is a “person with a disability” in accordance with the *Special school eligibility (“person with a disability” criteria)* policyapproved under section 165 of the *Education (General Provisions) Act 2006* (Qld) (EGPA)*;* and
13. Whether the special school to which the enrolment application was made is able to cater for the educational needs of your child.
14. After considering your application for internal rview, the delegated decision-maker will provide you with a decision in writing, to the address or email indicated in your internal review submission. The decision will be made within 40 school days of receiving the application for internal review in accordance with section 392 of the EGPA.

**APPLICATION FOR INTERNAL REVIEW OF SPECIAL SCHOOL ENROLMENT INELIGIBILITY FORM**

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| --- |
| **Child’s details** |
| **Surname:** (as per birth certificate) |  | **Given names:** (as per birth certificate) |  |
| **Sex:** |  | **Date of birth:** |  |
| **Current home address:** |  |
| **Email:** |  |
| **Currently enrolled in a school** | **☐ Yes** **☐ No** | **Current school (if applicable)** |  | **Current year level:** |  |
| **Parent’s details** |
| **Surname:** |       | **Given names:** |       |
| **Home address:** |       | **Contact number:** |  |
| **Proposed special school details** |
| I wish to present the following additional information to support my child’s enrolment at [insert name of state special school]*.* |
| **Additional information about my child to support my application** |
| The delegated decision-maker will consider all the information submitted in the original *Application for student enrolment* form and *Information notice - Requirements for enrolment in a state special school not satisfied* as well as any additional information you provided during the decision-making process.This form can be used to include any additional information you would like to be considered. You can also attach documents to this form.* I believe that my child’s educational needs are:
* Reasons why I believe this special school can best meet my child’s educational needs:
* Other relevant information that I would ask be considered (for example, identify if you disagree with any part of the Information Notice and set out why):
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| **Signature (only the applicant’s signature is required)** |
| Parent signature:  | Date:       |
| Parent signature: | Date:       |