Appeal by Parent or Carer

Parent and Carer Information

Student Surname | Student First Name

School

Name of person making appeal

Email address | Phone

Relationship to student

Appeal Information

An Appeal can only be considered after a request for a Review of Integration Funding Support has been completed. Please confirm a Review has been processed with your school principal prior to complete this form. It is important that all matters you wish considered in this Appeal are mentioned. You may attach supporting documentation to this form.

- ☐ Tick box to confirm a review has been discussed with the principal
- ☐ Tick box to confirm a school request for a change in funding form has been submitted and completed
- ☐ Tick box to confirm the principal discussed the outcome with Disability and Inclusion Advisor or Aboriginal Education and Wellbeing Advisor

Signature

Signature of person making appeal | Date

Please return this form together with any attached information to Disability.Support@det.nsw.edu.au.