**Application form for appeal against languages enrolment determination**

A student who wishes to appeal against the School Curriculum and Standards Authority’s (the Authority’s) languages enrolment determination must use this form. To appeal the original determination, additional information must be provided. Upon receipt of this application and the additional information, the Authority’s Languages Enrolment Determinations Appeals Committee will consider the student’s enrolment status and make a final determination.

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| **This application must be received by the Authority no later than 4.30 pm on the date specified in the notification email/letter. Note: late applications cannot be considered.** |

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| **Student information** |
|  |  |  |  |  |  |  |  |  |
| WA Student Identification Number |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Legal family name of the applicant |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| First given name |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Second given name |
|  |
| Street address |
|  |  |  |
| Suburb |  | Telephone number |
|  |
| School |
| Language for which an appeal is requested |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Contact email address |  |  |

**Additional information**

The notification advising you of the language course in which you were permitted to enrol, identified the criterion/criteria you were deemed not to have satisfied. To appeal the determination, you must provide information to demonstrate that you satisfy the criterion/criteria. Please attach relevant documentation.

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| Signature of student |  | Date |
|  |  |  |
| Signature of parent/guardian/carer |  | Date |

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| **Address for submission of application**School Curriculum and Standards AuthorityAttention: Administrative Assistant – Languages EnrolmentPO Box 816, Cannington WA 6987OrEmail: languagesenrolment@scsa.wa.edu.au |