

## Continuers Language Course

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### Application for Review of Eligibility Determination

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This form need only be completed if the student believes that the principal's determination has not been made in accordance with the course eligibility criteria, and the student is seeking a review of the determination by the principal.

#### PART A: TO BE COMPLETED BY THE STUDENT

Applicant details:	
Student Number:	
Student Name:	

Language:	
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Home school details:	
School Name:	
Contact Person:	
Phone Number:	
Principal:	

Teaching school details (if different from home school)	
School Name:	
Contact Person:	
Phone Number:	
Principal:	



**PART B: TO BE COMPLETED BY THE PRINCIPAL**

**Section 3: Principal's review and determination**

In reviewing the determination of a student's eligibility to enter a Stage 6 Language course, the principal is required to consider:

- the student's original *Application for Eligibility Determination*
- any additional documentation submitted with the original Application
- the additional statement made and any documentation that the student may have provided with the student's *Application for Review of Eligibility Determination*.

**Determination:**

\_\_\_\_\_ is  eligible  ineligible to commence the  
(student's name)

\_\_\_\_\_ course in \_\_\_\_\_.  
(name of course) (calendar year)

School / Institute: \_\_\_\_\_

Principal's Name: \_\_\_\_\_

Principal's Signature: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

## Continuers Language Course

### Appeal to NESAs against Principal's Eligibility Determination

This form need only be completed if the student wishes to appeal to NESAs against the principal's determination.

#### PART A: TO BE COMPLETED BY THE STUDENT

I \_\_\_\_\_ 

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(student name) (student number)

wish to appeal to NESAs against the principal's determination that I am ineligible to undertake the \_\_\_\_\_ Continuers language course.  
(language)

Student's Signature: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

#### PART B: TO BE COMPLETED BY THE PRINCIPAL

I acknowledge the student's appeal to NESAs against the determination I made that the student is ineligible to undertake the above Continuers language course. I will send all the relevant documentation that was considered in making the determination.

Principal's Name: \_\_\_\_\_

Principal's Signature: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_