

Application form

Internal Review of Working with Children Check decision

October 25

Are you eligible to apply for an internal review?

You may apply for an Internal Review if you've received a decision notice for any of the following:

- an Interim Bar which has been imposed for more 6 months
- refusal of your Working with Children Check (WWCC) application after risk assessment
- cancellation of your WWCC clearance after risk assessment

Please make sure you are eligible to apply. If unsure, we encourage you to contact our Internal Review team via review@ocg.nsw.gov.au noting the application fee is non-refundable.

When do you need to apply?

For refusal and cancellation decisions, you must apply within 28 days from the date of decision on your notice. If applying late, you'll need to explain why the application is late. An application fee of \$214 must be paid by Electronic Funds Transfer (EFT) before our team will consider if your application can be accepted. If we need further information or your application is not accepted, we will let you know. For interim bars, you may only apply if the interim bar has been in place for more than six months.

Can you work with children while the internal review takes place?

No. The decision remains in effect until there is an outcome of your internal review and offence provisions apply if you do not comply with your obligations under the *Child Protection (Working with Children) Act 2012* (the Act).

Documents to be submitted with your application

To avoid delays in processing, please ensure you provide the below documents with your application.

- A copy of the notice of decision
- Evidence of Proof of Payment (for example, a screenshot)
- A copy of the front and back of your NSW Driver's License or Proof of Identity card
- Any supporting documents you want to provide (this may include your resume, certificates or letters showing engagement in professional services)
- For late applications, evidence supporting the reasons for your late application

Internal Review decisions are published on the [Determinations and notices](#) page of our website.

Next steps

Your application will be assessed by the Internal Review team to determine if it is eligible for Internal Review. If accepted, you may be contacted for more information. The outcome of your application will be provided to you in writing.

Need help?

For details on the internal review, refer to the [Internal Review Policy](#) on our [website](#). For help lodging an application, contact review@ocg.nsw.gov.au.

Section 1 – Applicant details

Your details

| | |
|---|---|
| First name | |
| Middle name | |
| Last name | |
| Alias or previous names | |
| Date of birth | |
| Driver's License Number | |
| Your Working with Children Check or Application Number <i>This number can be found on your decision notice</i> | |
| Do you identify as Aboriginal and/or Torres Strait Islander? | <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Prefer not to say |
| Would you like us to contact you using an interpreter? If yes, please tell us the language or dialect. | |
| Please use this space below to indicate if you require any support or accommodations in communicating with us. | |

Your contact details

We will communicate with you in writing via email. Please make sure your contact details are correct as we may need to send you confidential information.

If you have specific communication needs due to disability, a non-English speaking background or other reasons, please advise us below. You may nominate a support person to speak to us on your behalf.

| | | | |
|------------------|--|-------|--|
| Phone number | | Email | |
| Postal address | | | |
| Previous address | | | |

Legal Advice and Representation

You are not required to have a lawyer to have an Internal Review. You may be able to obtain free legal help from [Law Access](#) (1300 888 529) or [Aboriginal Legal Services](#) (1800 733 233). If you do have a lawyer and want us to speak with them, please provide their details below.

| | | | |
|--|--|-------|--|
| Name | | | |
| Organisation | | | |
| Email | | Phone | |
| Do you want your legal representative to provide and receive correspondence on your behalf? <i>By giving this authority, the OCG can get information from and provide information to your legal representative for the purposes of your application</i> | | | |

Section 2 – Details of the decision to be reviewed

| | | | |
|------------------|--|--------------------------------|--|
| Date of decision | | Date you received the decision | |
| Type of decision | <input type="checkbox"/> An interim bar (in place for over 6 months) <input type="checkbox"/> Refusal of your WWCC application after risk assessment <input type="checkbox"/> Cancellation of your WWCC after risk assessment | | |

Is your application late?

If the application is for an Internal Review of a refusal or cancellation of a clearance, is it made within 28 days after notice of the reviewable decision?

- Yes
- No – please provide details below

If you are making an application for Internal Review out of time, please indicate the reason why your application was made outside of the time allowed. Please provide documents in support of your late application if available (for example, a medical certificate). You may be asked to provide further information to show why your application was not made within 28 days.

Reasons for your application

Please explain your reasons for applying for an internal review and why you think we should make a different decision. *We encourage you to address the specific points provided in the notice of decision and attach any supporting documents. If you need more space, you may attach this separately to your application.*

Section 3 – Your declaration

For the purpose of assessing my application under the *Child Protection (Working with Children) Act 2012* for internal review of a working with children check decision, I consent to:

- the collection, use and disclosure of my personal information, in accordance with the *Privacy and Personal Information Act 1998*;
- the conduct of criminal record checks in relation to myself; and
- inquiries being made about me of third parties and the individuals and organisations whose contact details I have provided in this form.

I consent to any information about me obtained in connection with the internal review of a working with children check decision being used for the purposes of the Children’s Guardian exercising other functions under the *Child Protection (Working with Children) Act 2012*, *National Disability Insurance Scheme (Worker Checks) Act 2018* or the *Children’s Guardian Act 2019*, including for the purposes of assessing an application for a working with children check clearance or a National Disability Insurance Scheme Worker Check.

I confirm that:

- The information provided in this form is complete and correct; and
- I understand that the provision of false and misleading information is a serious offence under the *Child Protection (Working with Children) Act 2012*.

| | | | |
|-----------|--|------|--|
| Full name | | Date | |
| Signature | | | |

Section 4 – Application fee

The application for internal review will not be valid until the application fee of \$214 is received. Payment can be made by Electronic Funds Transfer (EFT). Please attach proof that EFT payment has been made (e.g. a screenshot).

Subject description: APP or WWC Number SURNAME IR (for example: APP1234567 SMITH IR)

Pay: Office of the Children’s Guardian

Bank: Westpac

BSB: 032001

Account number: 174359

Section 5 – Lodgement of form

Email a copy of the form along with proof of payment and any supporting documentation to review@ocg.nsw.gov.au. You may also post this form along with proof of payment and any supporting documentation to:

Internal Review

Office of the Children’s Guardian

Locked Bag 5100

Strawberry Hills NSW 2012