

# Notice of Application to Review - (CPS05)



## Appointment to Staff Member Position

### Personal information

Full Name

*Surname*

*Given name*

*Station and region*

*Rank*

*Reg. No.*

Address for  
correspondence

*Street Address*

Work  Personal

*City*

*Postcode*

Work Phone

Home Ph:

Mobile Ph:

Email (*work*)

Email (*personal*)

*Please tick/cross the preferred email contact address for all correspondence. Both boxes may be selected.*

### Details of decision

Date of decision

Decision to be reviewed

Authorising Officer

Email address

### Grounds to have decision reviewed

*Section 33 of the Police Service Administration Regulation 2016 sets out that:*

*Additional decision open to review*

*- for section 9.3(1)(e) of the Police Service Administration Act 1990, a decision by the commissioner to appoint an officer to a position as a staff member under section 8.3(5)(a) of the Act is open to review under part 9 of the Act.*

### Planned Leave / Dates of Unavailability

Dates:

*Please provide any dates of unavailability. All correspondence will be emailed to the nominated email address and it is the responsibility of the applicant to check for any correspondence from this office or parties of the review.*

### Declaration

*I declare to the best of my knowledge and belief the information supplied herein is correct and complete. I recognise that it is my responsibility to provide all necessary additional information and documentary evidence to support my application on request by the Commissioner for Police Service Reviews.*

Full name:

Date:

Applications to review must be completed and emailed to [OCPSR@ccc.qld.gov.au](mailto:OCPSR@ccc.qld.gov.au) within 14 days of notification of the decision.

**Notice of Application to Review – (CPS05)  
Appointment to Staff Member**

**OCPSR**

**Grounds to have decision reviewed**

Please provide below a dot point summary of the issues that you believe to be relevant and that you would seek to be considered i.e. why do you consider the decision to be unfair in the circumstances.  
Please attach a copy of the correspondence from the Authorising Officer that is relevant.

**Word limit - Approximately 300 words or 2000 characters**

**You will be invited to provide a more detailed submission addressing your concerns once all the relevant material has been provided by the Authorising Officer.**

**Privacy Collection Statement**

The collection of this information is authorised by the *Police Service Administration Act 1990* (Qld). The information on this form will not be disclosed without your consent unless such use or disclosure is authorised or required by law, including the *Police Service Administration Act 1990* (Qld), the *Right to Information Act 2009* (Qld) and the *Information Privacy Act 2009* (Qld). You may seek access to personal information that the Office of the Commissioner for Police Service Reviews holds about you. If you wish to seek access to your personal information or inquire about the handling of your personal information, please contact the Commissioner for Police Service Reviews by email at [OCPSR@ccc.qld.gov.au](mailto:OCPSR@ccc.qld.gov.au) or by telephone 3360 6387.