# Review of our decision

### Who can request a review?

If you believe that the decision made by our Office about your complaint is wrong, you can ask us to review the decision. A request for a review should be submitted in writing within three months from the date we advise you of our decision.

### How can you request a review?

You can request a review by completing the ‘Request for review’ form and sending it to us by:

* post at GPO Box 442, Canberra ACT 2601
* via email to [**ombudsman@ombudsman.gov.au**](mailto:ombudsman@ombudsman.gov.au)

Tell us why you think our decision is wrong and provide any new information that is relevant to the decision we made. Be specific rather than general. The review manager will consider the information you provide and decide whether or not we will review our decision.

Review requests are different to complaints about our service. If you are unhappy about the way we handled your complaint, the conduct of our staff or about our policies and procedures you should raise the issue with that staff member or with their supervisor.

### What happens when you request a review?

If we agree to review our decision, your request for review will be assigned to an officer who was not involved in the original investigation of your complaint. That officer may contact you to ask for further details about why you believe our decision was wrong, and will keep you informed of how your review is proceeding.

A review is not a reinvestigation of your complaint. The review officer will look at whether the processes our staff followed were fair and adequate, and whether the conclusions they reached were reasonable and properly explained to you.

After the review officer has considered your circumstances and the information you have given us, they may:

* uphold the decision of the original investigation officer
* send the matter back to the original investigation officer or another officer for further investigation.

We will only review a decision once.

### Services to assist you to request a review

If you are a non-English speaking person, we can help you through the Translating and Interpreter Service (TIS) on **131 450**. If you are hearing, sight or speech impaired, a TTY service is available through the National Relay Service on **133 677**.

### Request for review of our decision

To ask us to review a decision we have made about your finalised complaint, you can complete this form and send it to us by post or email. Requests should be submitted within three months of the date we advise you of our decision. **If more space is needed, attach an extra sheet to this form.**

**Title: ** Mr  Mrs  Ms  Miss  Other: **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Family name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**First name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Postcode: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Contact Number(s): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Name of the agency or organisation you complained about:**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Ombudsman reference number (if known):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**What is the decision you disagree with?:**

**When were you told about this decision?: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Why do you think the decision we made is wrong?:**

 Advice given  Behaviour of staff  Decision/Action   
 Our procedures  Time taken

 Other: **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Give details:**

This form can be filled out and mailed to:

**Commonwealth Ombudsman, GPO Box 442 Canberra ACT 2601.**

Alternatively, you can download it and email as an attachment to [**ombudsman@ombudsman.gov.au**](mailto:ombudsman@ombudsman.gov.au).

Please contact us on **1300 362 072** if you would like assistance completing this form (calls from mobile phones at mobile phone rates). More information on your review rights is available on our website **ombudsman.gov.au.**