



Request to review the outcome of an application for State nomination

Read the instructions on the back page before completing this form. You will be required to acknowledge that you have read and understood these instructions before you submit your request for a review.

Make sure that the information you provide in this request matches the information you submitted in your original application.

Name of applicant	
Applicant email address	
State nomination reference number	
Occupation	
Country of citizenship	
Date of application for State nomination	
Date of email advising decision	

Reason for requesting a review

I acknowledge that I have read and understood the notes on completing this form.

Email this form to migration@dtwd.wa.gov.au.

Instructions on completing this form

- Complete and email this form to migration@dtwd.wa.gov.au within 14 calendar days of the date of the email advising the outcome of your application.
 - You must include the reasons you believe the application outcome was wrong or unfair.
 - It is essential that the information in this form matches the information provided in your original application.
 - You will be sent an email confirming that your request for a review has been received.
 - Migration Services will review the documentation and information you supplied with your original application. No additional documentation or changed circumstances will be considered.
 - Once the review is complete, you will be sent an email with the outcome.
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