

Inquiry into the Management of Child Sex Offender Information

CONTACT DETAILS

Phone:

Email:

Organisation Name:

Organisation Postion:

Address:

Suburb:

State:

Postcode:

Your age group:

YOUR SUBMISSION

Submission:

I have the right to know if a convicted child sex offender is living in my community.

We need to do our very best to keep our children safe. How is that possible when an offender could well be living next door to me. Prior to Covid 19 I had my young grandson staying with me 2 days a week. I can't guarantee his safety if I'm not aware of the dangers and threats around us.

Are you interested in appearing before the committee in person to talk about your submission?

No

FILE ATTACHMENTS

File1:

File2:

File3:

Confidentiality:

Signature: