CABINET COMMENT FORM

**Submission Title:**

**Agenda Number:**

**Minister:**

**Portfolio:**

**COMMENT BY: Department/Agency/Minister**

**Was your agency/Minister’s office consulted in the preparation of this submission?**

Yes [ ]  / No [ ]

**Does your agency/Minister’s office support the recommendations of this submission?**

Yes [ ]  / No [ ]

**If your agency/Minister’s office does not support this submission, detail the key issues you would like Cabinet to consider in its deliberations**

**Please notify the relevant policy officer in Cabinet Office at the earliest opportunity if a ‘do not support’ response is proposed, or if comments are being provided for the submission that require resolution**

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| --- |
| Prepared by: Telephone:Approved:Chief Executive/Chief of Staff (or delegate):Date: |