# ACADEMIC APPEAL APPLICATION

**Personal details**

**Student number:** _____ **Enrolled course:** _____

**Surname:** _____ **Mobile:** _____

**Given name(s):** _____ **Email:** _____

**I Request a review of final exam /mid-term exam /assignment result in unit:**

**Unit Code:**_____ **Lecturer's Name:**_____

**Tutor's Name:**_____ **Mark Received:**_____

**The Reasons of review (Please provide statement of reasons)**

_____

_____

_____

_____

_____

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_____

**Declaration**

*I confirm that I have provided the correct information and details and I understand that the school will make the decisions.*

**Student signature:** _____ **Date:** ____ / ____ / _____

# ACADEMIC APPEAL APPLICATION

**OFFICE USE ONLY**

**Date this request was lodged ____ / ____ / _____**

**The exam paper is reviewed by _____(Block Letters)**

**Date:____ / ____ / ____**

**Comments:** _____

_____

_____

_____

_____

**Result amendment:** ☐ **Yes** **New Mark Granted:**_____ ☐ **No**

**Signature:** _____ **Date:____ / ____ / ____**

**Program Director Approval:** ☐ **Yes** ☐ **No** **Signature:** _____