STUDENT ASSESSMENT APPEAL FORM

If a student believes that their result for an assessment is unfair, then they are entitled to appeal that result.

The Form below must be completed and signed by the student within 48 hours (2 school days) of receiving detailed feedback on the result from the subject teacher.



The student must send/give the completed Form to the to the relevant Head of College. The Head of College will review the assessment marking and determine the course of action. The course of action may include a remarking of the assessment, an adjustment of the result, or no change.

If a student is unable to meet this timeframe for any reason, they must contact the Head of College to explain the

The Head of College will advise the student of the outcome within 48 hours (2 school days) of receiving the Appeal Form.

The Form is available on Blackboard.

circumstances.

Student Name: ______ |
Preferred Name: _____ |
ID No: _____ |
Subject: _____ |
Name of Assessment: _____ |
Date of Assessment: _____ |
Reason/s for Appeal: _____ |

[If you need to provide more explanation, please contact the Head of College within 2 school days to discuss.]

Head of College

Name _____ | Signature _____ |
Date ______ |
Date _____ |
Date _____ |
Date _____ |
Date _____ |
Date ______ |
Date _______ |
Date ______ |
Date _______ |
Date ________ |
Date _______ |
Date _______ |
Date _______ |
Date _______ |
Date ________ |
Date _______ |
Date ________ |
Date ________ |
Date ________ |
Date ________ |
Date _________ |
Date ________ |
Date _________ |
Date _________ |
Date _________ |
Date _________ |
Date __________ |
Date ____________ |
Date ____________ |
Date _____________ |
Date ____________ |
Date ________________ |
Date _____________________|

Outcome of Appeal: