

# Appeal Form

**F-2.1.2\_v7**



**Student Name:** \_\_\_\_\_ **College:** \_\_\_\_\_

**Student Number:** \_\_\_\_\_ **Course:** \_\_\_\_\_

**Contact No:** \_\_\_\_\_ **Email:** \_\_\_\_\_

**Reason for Appealing** *(please tick as appropriate)*

<b>Outcome of</b>	<input type="checkbox"/> Late enrolment <input type="checkbox"/> Assessment marks <input type="checkbox"/> Others: _____
<b>Refusal of</b>	<input type="checkbox"/> Leave of Absence <input type="checkbox"/> Release <input type="checkbox"/> Refund
<b>Intention to Report (ITR) for</b>	<input type="checkbox"/> Non-payment <input type="checkbox"/> Misbehaviour <input type="checkbox"/> Attendance

**Details of your grounds for appeal** *(Attach documentary evidence and any additional pages if required)*

<b>Student Signature:</b>	<b>Date:</b>
<b>Received by:</b>	<b>Date:</b>

If appealing for late enrolment, indicate the subjects you wish to enrol.

Subject Name	Day	Time
1.		
2.		
3.		

**Official Use Only**

Appeal successful: <input type="checkbox"/> Yes <input type="checkbox"/> No	
<i>Further Details:</i>	
<b>Name:</b>	<b>Date:</b>