**Academic Appeal Request Form**

**All** **sections of this form should be completed in full**. Before completing this form you should read the Assessment and Verification Policy and COVID 19 Revised Candidate Appeals Procedure.

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| **Student Details** | |
| Student Name |  |
| Student ID Number |  |
| Student Email address |  |
| Contact Number |  |
| Course Title |  |

1. **INFORMAL DISCUSSION**

Before you consider submitting an academic appeal you should first discuss your concerns informally with your lecturer or Curriculum Manager (or equivalent) and request the outcome be reconsidered**.** Where possible this discussion should take place within 10 working days of you receiving the assessment decision.

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| **Have you raised your concerns informally with an appropriate member of staff?** | Yes □ No □ |
| **If no, please state the reasons why:** | |
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| **If yes, please include the following:** | |
| **Name of staff member:** | |
| **Date of Discussion:** | |

1. **REQUEST AND INTERNAL APPEAL**

If you remain dissatisfied, and your concerns are not resolved through informal discussion, you are then entitled to submit an academic appeal. The request should be made within 10 working days of informal discussion outcome.

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| **Nature of the Appeal** |
| **Clearly state the nature of your appeal***.* (You should include full details of the unit/s, assessment decision and/or award outcome that you are appealing against) |
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1. **GROUNDS FOR APPEAL**

**Appeals may be made against:**

* Non award of an individual unit, or units;
* Non award of a course/qualification;
* Grade awarded to a graded unit;
* Decision to withdraw the candidate from an outcome/unit/course ;
* Deferred results e.g. if candidate felt they had submitted enough work to pass

**Allowable circumstances of appeal:**

* Personal circumstances not known to those making the assessment decision;
* Access to internet, college systems or assessment not possible or restricted
* Care responsibilities impeded ability to participate
* Home schooling responsibilities
* Financial constraints
* Mental & Physical health issues
* Work commitments – front line services
* Volunteering on the front line
* Home life constraints
* Apparent irregularities or inconsistencies in assessment which may have affected the Candidate’s result.

Apparent irregularities or inconsistencies in assessment which may have affected the Candidate’s result

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| **Summarise your reasons for appeal** |
| **Carefully and concisely explain your circumstances and summarise the reasons why you think the decision you are appealing against should be amended.**   * Provide an explanation for each of the reasons for appeal and make reference, where possible, to specific pieces of evidence * If you are raising an appeal on the grounds of extenuating circumstances, it is important not just to explain how they affected your performance, but also the reasons why you were not able to make them known to the teaching staff beforehand (please review allowable circumstances on procedure) |
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| **What impact have you faced as a result of the decision:**  Please summarise the effect the decision/grade/outcome has had on your future plans (for example, failure to meet university entry conditions) |
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| **Supporting documentation:**  Please list here any documentation you are submitting in support of your appeal. This may include, for example, medical certificates, emails, letters or notes of meetings. Please include all supporting documentation at this stage as you may not be able to add additional evidence later. Evidence should be provided electronically – an online link will be sent to you on receipt of your Academic Appeal Request Form for you to upload the documentation to. |
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1. **DECLARATION**

**Please read the following carefully before adding your signature:**

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| By submitting this form, you confirm that you agree to the following:   * That you have read and understood the Assessment & Verification Policy and the COVID 19 Revised Candidate Appeals Procedure. * That you have included all the concerns and supporting evidence that you wish to have considered, and understand that the College may refuse to take on any additional matters which are introduced later in the process. * You understand that information contained in this form and evidence included as part of your submission may be shared with relevant College staff/departments. * That the information contained in this form is a true and accurate reflection of your work | |
| **Signature** | *A digital signature by way of email address submission is acceptable here* |
| **Date** |  |

1. **SUBMISSION OF YOUR APPEAL**

Once you have completed all sections of this form, please send the form by email to [Covid-19Appeals@nescol.ac.uk](mailto:Covid-19Appeals@nescol.ac.uk). Prior to submitting an academic appeal you should first discuss your concerns informally with your lecturer or Curriculum Manager (or equivalent) and request the outcome be reconsidered**.** Where possible this discussion should take place within 10 working days of you receiving the assessment decision.

You will be sent a secure link to upload all evidence to; evidence should not be attached to an email but uploaded direct to this secure area. Any hard copy evidence should scanned (PDF format) and clearly labelled. If this is not possible you can submit a clear photograph of hard copy evidence.

Please keep a copy of this form and any supporting documentation for your records

**For office use only**

**ACADEMIC APPEAL OUTCOME RECORD**

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| --- | --- | --- | --- |
| Student Name |  | ID Number |  |
| Course Code |  | Graded Unit Code |  |
| Course Title |  | | |

**Outcome of Appeal**

Appeal Dismissed – No change to results □

Appeal Upheld – Pass Awarded □

Appeal Upheld - ~Graded Unit Grade Amended □

Revised Graded Unit Grade Outcome A □ B □ C □

**Reason(s) for Decisions Reached:**

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| **Signed on behalf of the Appeals Board**  **(Associate Vice Principal)** |  |
| **Date** |  |