Evershine College

Appeals Lodgement Form

Appeals No.

SECTION 1 – Personal Details

Name:		**Title**:	☐ Mr ☐ Mrs ☐ Ms ☐ Miss
Address:		**Post Code**:	
Email:		**Tel/ Mobile**:	

SECTION 2 – Course / Unit/ Module Details

Code/Title :		**Date**:	/ /
Assessor:			
Task:			

SECTION 3 – Appellant Declaration

I have read and understood the Evershine College's Appeals Policy and acknowledge that Evershine College will use an independent assessor to resolve this appeal, and that I will be given the opportunity to present my case formally at an interview. Should the appeal progress to an external arbitrator, I agree to pay the arbitrator fee for this appeal; however, should my appeal be successful I will receive a full refund of this fee.

Signature :		**Date**:	/ /

SECTION 4 – Appeal Details

Please tick the area relating to your grounds for appeal:

☐ Incorrect assessment decision

☐ Bias of the assessor

☐ Lack of competence of assessor

☐ Incorrect information provided regarding assessment

☐ Inappropriate assessment task/process

☐ Faulty, inappropriate or lack of equipment

☐ Inappropriate assessment conditions

Please outline the situation for your appeal:

Appeal discussed with the Assessor: ☐ YES   ☐ NO

Appeal has been successfully resolved: ☐ YES   ☐ NO

Admin Use Only

		Initial		Date:	/ /
☐	Appeal Form Received (Admin)	Initial		Date:	/ /
☐	Appeal Lodgement recorded (Register)	Initial		Date:	/ /
☐	Letter of Acknowledgement sent	Initial		Date:	/ /
☐	Appeal Forwarded to Director	Initial		Date:	/ /

Note: Use "Appeals Progress Form" to record further actions regarding this Appeal