

Academic Appeals Form

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|--|---|----------------------|--|
| Personal Details | | | |
| Full name (<i>First/last</i>): | | D.O.B: | |
| Address: | | | |
| Phone: | | Email: | |
| <input type="checkbox"/> International Student | <input type="checkbox"/> Domestic Student | Today's Date: | |
| USI: | | AIAC Student Number: | |

| | | | |
|---|--|---|--|
| Assessment to be appealed (<i>Please attach original assessment</i>) | | | |
| | | | |
| Assessor's name | | Date of assessment | |
| Are you appealing the result of a prior complaint? | | <input type="checkbox"/> Yes* <input type="checkbox"/> No | |
| *If YES, please provide date of complaint and attach a copy of the original complaint form. | | | |

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| Reasons for appealing |
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| Action requested (<i>Options, resolution process & rights should be explained to complainant</i>) | |
| <input type="checkbox"/> Resolution with assistance | <input type="checkbox"/> Pursue matter through third party |
| <input type="checkbox"/> Formal complaint process | <input type="checkbox"/> Other: |

| | |
|--|-------|
| Assessors response | Name: |
| | |
| Operation Managers' response and decision | Name: |
| | |

Follow up

- ☐ Sought advice from external agency
- ☐ Feedback provided to Complainant and Assessor
- ☐ No Further action required (the matter will be closed)
- ☐ All internal resolution obligations have been fulfilled
- ☐ All documents pertaining to the appeal included in student file
- ☐ Incident recorded in the Complaints and Appeals register
- ☐ Incident recorded in Quality Improvement register
- ☐ Other:

SIGNED OFF

Compliance Officer:

Date:

Head of Operations:

Date:

Details are to be recorded or updated in the complaints & appeals register form AIAC-QHS-RG-007_v1. Items marked for improvement should also be logged into the Quality Improvement Register (AIAC-QHS-RG-001_V1).

Students must be informed if the review process is going to take more than 60 days. All details and supporting documents are to be stored with the students' file.