



APPEAL REQUEST

Student Name:	Student ID
Programme:	Date

1. DETAILS OF APPEAL

I wish to appeal the outcome of the decision for:

Module:

Assessment:

on one of the following grounds (tick box)

- Substantial information directly relevant to the quality of a performance in the examination which for good reason was not available to the Board of Examiners when their decision was taken.¹
- Alleged improper conduct of the examination.

I append a statement in support of my claim.

_____ Student _____ Date

FOR OFFICE USE ONLY

Appeal grounds established Yes No _____ Head of Quality _____ Date

Appeal Hearing arranged Date: _____

Copied to: HOSA Registrar Dean of Faculty