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# STUDENT APPEALS FORM

(Please refer to the Complaints and Appeals Policy and Procedure)

PERSONAL DETAILS		
Student ID:		Title (Circle) Mr Mrs Miss
Surname:		
First and middle names		
CONTACT DETAILS		
Current valid residential address:		
Contact phone number:		
Email address:		
APPEAL DETAILS (Tick the box related to your Appeal)		
<input type="checkbox"/> Academic Misconduct <input type="checkbox"/> Assessment outcome <input type="checkbox"/> Attendance records <input type="checkbox"/> Course fees	<input type="checkbox"/> Notice of intention to report to DIBP <input type="checkbox"/> Notice of Intention to Cancel <input type="checkbox"/> Course withdrawal <input type="checkbox"/> Other	
APPEAL SUMMARY (Student to fill) (Please outline the reasons for your appeal and attach any evidence to support your appeal.)		



**OUTCOME OF THE APPEAL (For Dolph Business School use only)**

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**STUDENT ACKNOWLEDGEMENT**

I certify that the information provided is true and correct to the best of my knowledge.

Signature:

Date:

**PRIVACY NOTICE**

The information provided on this form will be used exclusively to resolve your appeal. None of the information you provide on this form will be discussed to anyone outside of the Academy without your permission, unless we are required to do so by law.

**OFFICE USE ONLY**

Receiving staff member:		Date:	
Appeal outcome:	<input type="checkbox"/> Successful <input type="checkbox"/> Unsuccessful		
I confirm all required action/s are completed and student informed of the outcome: <input type="checkbox"/> Yes <input type="checkbox"/> No			
RTO Officer' name:		Date:	
Signature:		Scanned & Filed:	<input type="checkbox"/> Yes <input type="checkbox"/> No