Appeal Against Intention to Report Form

Section 1: Student to Complete

First Name: _____ Last Name: _____

Student ID : _____ Campus: _____

Course/ Program: _____

Contact Number: _____ Email: _____

Details of your grounds for appeal *(Attach documentary evidence and any additional pages if required)*

***Please use page 3 if needed.**

Supporting evidence:

- ☐ Medical
- ☐ Legal
- ☐ Other _____

Student Declaration:

The above information is true and accurate-

- ☐ I have provided supporting documents.
- ☐ I have been advised of the course progress policy.
- ☐ I have been advised of appeals policy and process.
- ☐ I understand if the agreed action plan is not met, this will result in an unsuccessful outcome.

Student Signature:_____ Date: _____

Section 2: Course Coordinator to Complete

Details of meeting with the student:

Section 2.1: Assessment of the Student Appeal:

The student had compassionate and compelling ground/s for unsatisfactory course progress:
- □ Yes
- □ No

The student appealed without evidence:
- □ Yes
- □ No

Appeal successful:
- □ Yes
- □ No

Section 2.2: Action Plans *(Successful appeal)*

- □ New course plan developed for the student
- □ Student advised to complete reassessment
- □ Advised of course progress requirements and attendance
- □ Advised of successful appeal outcome

Reassessment Details

Subject(s): _____

Trainer and Assessor: _____

Due Date: _____

Follow-up Meeting Date: _____ Time: _____

Section 2.3: Action Plans *(Unsuccessful appeal)*

- □ Advised of unsuccessful appeal outcome

Staff Signature:_____ Date: _____

Section 3: Student Advisor to Complete

External Appeal:
- □ Yes
- □ No

Checklist:
- □ Reported on PRISMS if appeal is unsuccessful
- □ Paradigm records updated

Further Details:

Student Advisor Signature:_____Date: _____