

Re-assessment of Result (HE) Application Form

1. Students who have concerns about their assessment result(s) should discuss the result(s) with the Subject Co-ordinator in the first instance, within 5 working days of receiving the result(s). See Section 3.10 of the Assessment (HE) Procedure.

2. If the matter remains unresolved, students can submit this application form to the Head of Program within 10 working days of receiving the result(s). Attached to this application form, should be documentation justifying any such request. See Section C below.

The result of any re-assessment will be final. Please refer to the Assessment (HE) Policy and Procedure for further information.

Section A: Student Details

Family Name:		Given Names:	
Student No:		Mailing Address:	
Suburb / Town:		State:	
Email Address:		Post Code:	
		Phone Number:	

Section B: Assessment Details

Course Name:		Subject Name:	
Assessment Task:			
Lecturer Name:		Awarded Grade:	

Section C: Re - Assessment Request

I have attached documentation justifying this application for re-assessment:	<input type="checkbox"/> Yes (3 A4 page maximum)
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Section D: Student Declaration

I have read the relevant documentation and declare that the information provided within this application is correct and accurate. I accept that the provision of false or inaccurate information will result in my application for re-assessment being dismissed, with no further grounds for appeal.

Student Name:		Student Signature:		Date:	
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