



ACADEMIC APPEAL APPLICATION FORM

Printed copies of this text are not controlled. Always check the CIT website cit.edu.au to ensure this information is correct.

Before lodging an Academic Appeal Application Form, please ensure you have first spoken with your Teacher, and if you are still unsatisfied, the Education Manager. If after these steps you are still not satisfied, this form should be submitted at any Student Services Hub.

First Name: _____ Surname: _____ CIT Number: _____
Address: _____
Suburb: _____ State: _____ Post Code: _____
Phone Number: _____ Email: _____
Program Code: _____ Program Name: _____
Subject Code/CRN: _____ Subject Name: _____
Semester: _____ Teacher Name: _____

I request a review of the grade awarded for the above subject. I am aware that a \$30.00 fee is charged for each subject grade that I am seeking a review; and that this money must be paid before any formal appeal can be considered. I understand that the fee will only be refunded if my application is found successful.

Student Signature: _____ Date: _____

Office Use Only

Has the student paid the Academic Appeal fee for this subject? Staff Member Name: _____

Date paid: _____ Receipt Number: _____

Approved Not Approved

Evidence attached detailing reason for Grade change

Centre Director signature: _____

Centre Director name: _____ Date: _____

Checklist

Final decision documented and original on Institute File. Copy sent to SSH for Student File.

Update of Result Sheet completed and sent to Awards & Graduation Team, date sent:

Refund of Application fees applicable, date request sent to SSH

Academic Appeal Application Form V1 updated 16/05/2011