

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, ensure you have first spoken with your Teacher, and if you are still unsatisfied, the Head of Department. See CIT's **Academic Appeals Policy** at **cit.edu.au** for more information. If after you have followed all of the above steps and you are still not satisfied you are then able to lodge an Academic Appeal form. Lodge the completed Academic Appeals Application Form with your written application, to Student Services, within 20 working days from the publication of the final result on the Student Management System.

First Name:	Surname:
Address:	
Suburb:	State: Postcode:
Phone No: Email:	
Course Code: Course Name:	
Subject Code/ CRN: Subject Name:	
CIT Number: CIT Semester:	Year:
Teacher Name:	
I request a review of the final unit result for the above subject and I have provided attached evidence to support my appeal.	
 Ground for academic appeals apparent inconsistency in applying the rules of the assessment to the conduct of the assessment apparent inconsistency when allowing the application of reasonable adjustments to assessment practices a perceived inconsistency in issuing assessment decisions disputed decision on academic misconduct, such as plagiarism, cheating or misuse of generative artificial intelligence perceived departure from unit or course content, as stated in the curriculum, course outline or underpinning knowledge and skills identified within the relevant subject guide or nationally accredited training product 	 personal conflict with CIT teaching staff, which the student perceives as precluding them from meeting unit or course requirements failure of staff to comply with assessment requirements, as stated in the unit or subject guide medical reasons personal reasons other, please specify
Signature:	Date:
All personal information provided will be handled confidentially in accordance with the Information Privacy Act 2014. Details provided may be checked with or supplied to other authorised agencies eg. Centrelink and NCVER where necessary or required by law.	
CIT Student Services Use Only	
Date received:	- · · · · · · · · · · · · · · · · · · ·
Sent to Director:	College Name:

Entered on TRIM:
TRIM reference number:

College Use Only

Approved

Not Approved
Date:
Date:
Director Name:
Director Name:
Director Signature:
Checklist
Final decision documented (paperwork scanned and attached to CRM incident, original filed on Institute File)

Date:

Update of Result Sheet completed and sent to Awards & Programs Team

CRM reference number:

Entered on CRM: