

# Academic Appeal Form

Students who believe that the academic judgement they have received is unfair and not transparent are entitled to seek a review of, or appeal against their assessment outcomes under NTI's [Assessment Policy](#). Appeals against assessment of assignments must be made within two (2) weeks of receipt of the assignment result.

## STUDENT DETAILS

Given name/s

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Surname/family name

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Student ID

## CONTACT DETAILS

Phone number

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Email

## FOUNDATIONS OF APPEAL

Students cannot lodge an appeal simply because they are dissatisfied with the academic decision. They must demonstrate that the grounds for appeal exist e.g - failure to assess work in accordance with specific criteria or bias by a marker.

In support of your appeal, please provide a summary of your case and attach supporting evidence if available.

Subject Code

Subject Name

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Year and Semester

Lecturer's Name

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I hereby lodge an appeal against

Single assessment task

Assessment Name

Current Mark

Subject Grade

Current Grade

Reason for appeal:

### STUDENT DECLARATION

I declare that to the best of my knowledge the information supplied on this form is correct and complete.  
 I acknowledge that the provision of incorrect information or the withholding of relevant information relating to my request may result in a delay in the processing of my appeal.

Student signature \_\_\_\_\_ Date \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Student Services Office
<p>Application received by:</p> <p>Date: ____ / ____ / ____</p> <p>Appeal request to be forwarded to</p> <p style="text-align: center;"> <input type="checkbox"/> Head of Program           <span style="margin-left: 200px;"><input type="checkbox"/> Dean of Studies</span> </p>

Head of Program
<p>Appeal Outcome:</p>          <p>Signature _____ Date ____ / ____ / ____</p>

Dean of Studies
<p>Appeal Outcome:</p>          <p>Signature _____ Date ____ / ____ / ____</p>