

Appeals Form

Please ensure you have read the Appeals Policy regarding your specific qualification before completing this form.

Candidates must be 16 to make an appeal on their own behalf, any candidates under this age should ensure the appeal is made by their teacher/parent/guardian or similar responsible adult.

Candidate Full Name	
Candidate ID/Number	
Qualification(s) taken	
Date of Assessment or Year of intake	

Name of person making the appeal (if different)	
Relationship to candidate (teacher, parent, guardian etc.)	
Correspondence Email	
Contact telephone number	

I am making the appeal in accordance with the advertised policy against the following concern:

- RSL's decision on a reasonable adjustments or special considerations request
- RSL's decision on the outcome of a malpractice or maladministration investigation
- In respect of errors in procedure during the assessment
- In respect of errors in matching comments to marks awarded for the assessment (Graded Exams/Diplomas)
- In respect of results of assessment (Production/Theory/Vocational)

I am appealing in this respect because:

Appellants may continue on a separate page should they need, but all appeals must be sent with this cover form completed.