Appeal Form

Student Name: _____ **Student Number**: _____

Contact No: _____ **Email**: _____

Address: _____

Reason for Appealing *(please tick as appropriate)*

Refusal of	☐ Leave of Absence ☐ Release ☐ Refund
Intention to Report (ITR) for	☐ Attendance ☐ Non-payment ☐ Misbehaviour ☐ Course Progress

Details of your grounds for appeal *(Attach documentary evidence and any additional pages if required)*

Student Signature:	**Date:**
Received by:	**Date:**

Official Use Only

Appeal successful: Yes No

Further Details:

Name:	**Date:**