appeal form

Before completing this form you should read the Appeals Policy and Appeals Procedure. For impartial advice please contact the FXU Students’ Union.

Appeals must be submitted within **twenty (20) working days** of the outcome of the Assessment Board, Academic Misconduct Panel, Academic Disciplinary Committee or other decision-making body.

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| 1. Your details |

Full name:

………………………………………………………………….

Student number:

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| --- | --- | --- | --- | --- | --- | --- |
|  |  |  |  |  |  |  |

Course title:

………………………………………………………………….

Year of study:

1 2 3 PG

Preferred contact email address: …………………………………………………………

*We will send all communications relating to your appeal to your university email address unless otherwise specified.*

Preferred postal address: ………………………………………………………………….

*Upon completion of the appeal you will receive a Completion of Procedures letter to the above address.*

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| 2. Grounds for appeal |

Appeals can only be made on the following grounds. Please tick to indicate on which grounds you wish to lodge your appeal:

a) That there has been a material error or irregularity in reaching an academic or other decision.

b) That your performance was adversely affected by illness or other factors which you were unable or, for valid reasons, unwilling to divulge before the decision concerned was reached.

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| 3. Details of appeal |

Please explain in full the grounds on which your appeal is based, including:

* Details of the circumstances you wish to be considered
* Specific modules/assessments and how they were affected
* Specific dates of circumstances

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| *Please enter text here. Box will expand as you type.* |

Please list the supporting evidence attached to your appeal. If you are unable to provide evidence please state why:

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| *Please enter text here. Box will expand as you type.* |

Please describe the request you would like to make/desired outcome of the appeal:

|  |
| --- |
| *Please enter text here. Box will expand as you type.* |

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| **4. Declaration** |

Please tick to confirm the following:

I have read the Appeals Policy and Procedure

I have included all relevant information to support my appeal

I have made a copy of all documentation and supporting information for my records

I authorise those involved in the process to have access to relevant information required to make a decision, and I permit access to sensitive information (for example, a file held by the Student Support Services) as necessary for the investigation into and consideration of my complaint

Signature: …………………………………………………………. Date: ……………………

Please return this form by email together with scans of your supporting evidence to [QAE@falmouth.ac.uk](mailto:QAE@falmouth.ac.uk).

Alternatively you can print this form and send it along with your supporting evidence to Quality Assurance & Enhancement, Falmouth University, Falmouth Campus, Woodlane, TR11 4RH.