



APPLICATION FOR APPEAL OR ASSESSMENT RECONSIDERATION

Campus	
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Section 1: Application Information (to be completed by Student)

Name	Stud ID	
Programme		
Intake (month/year)		
Code & Name of Module Applied		
Semester	Credit Hours	Contact Hours
Reason for Appeal:		Justification: * <input type="checkbox"/> Grade Awarded <input type="checkbox"/> Date of Transcript <input type="checkbox"/> Others I here by certify the information provided, pertinent to application is true and correct & I submit the necessary in support of my claim. Student Date

Section 2: Evaluation (to be completed by Lecturer In Charge of the Module)

Lecturer In Charge	
Evaluation Made:	Mode of Evaluation: <input type="checkbox"/> Re-evaluate existing work submitted <input type="checkbox"/> Evaluate newly submitted work <input type="checkbox"/> Others I here by certify the validity & accuracy of the stated evaluation. Lecturer In Charge Date

Section 3: Evaluation (to be completed by Head of Department)

Results for Appeal:	I here by certify the validity & accuracy of the stated evaluation. Head of Department Date
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Section 4: Approval & Data Verification **Section 5: Registry**

<input type="checkbox"/> Submit Application to AC <input type="checkbox"/> Verified with Faculty HOD Date	<input type="checkbox"/> APPROVED <input type="checkbox"/> Not Approved Academic Director Date	<input type="checkbox"/> Data Verified & Updated into System Registry Date
Name.....	Name.....	Name.....

*Supporting documentation to be submitted/presented