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**REQUEST FOR REVIEW OF AN ACADEMIC APPEAL FORM**

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| **Please ensure that you have read and understood the Academic Appeals Regulations available at:** [**https://registry.southwales.ac.uk/student-regulations/academic-appeals/**](https://registry.southwales.ac.uk/student-regulations/academic-appeals/)**Please ensure that you provide a copy of your results with your appeal. Appeals received without results will be returned****This form should be submitted to the Student Casework Unit within 10 working days of notification of the outcome of a stage 2 academic appeal, via:** **studentcasework@southwales.ac.uk** |

**YOUR DETAILS**

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| **Surname:** |  | **First Name(s):** |  |
| **Student number:** |  |
| **Email address:** |  |
| **Telephone Number:** |  |
| **Course:** |  |
| **Faculty:** |  |

**ASSESSMENT AFFECTED**

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| **Module code:** | **Module title:** | **Module tutor:** | **Type of assessment:** | **Coursework deadline/date of exam:** | **Did you submit the coursework/attempt the examination:** |
|  |  |  | *e.g. coursework or exam* |  | Yes [ ]  No [ ]  |
|  |  |  | *e.g. coursework or exam* |  | Yes [ ]  No [ ]  |
|  |  |  | *e.g. coursework or exam* |  | Yes [ ]  No [ ]  |

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| **Please tick the box(es) that describes your grounds for requesting a review:** |
| Ground A | You have evidence that the procedures at stage 2 were not conducted in line with the regulations and this has materially disadvantaged you. |[ ]
| Ground B | You have new and relevant evidence which for good reason was not available at the time your stage 2 academic appeal was submitted. *(NB Sensitive personal, family or cultural reasons will not be accepted as good reason as they should have been drawn to attention at stage 2)*. |[ ]
| Ground C | You have evidence that the outcome at stage 2 was not reasonable in the circumstances. |[ ]

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| **Please outline your reasons for requesting a review of your stage 2 academic appeal and why you are not satisfied with the original outcome.** |
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| **Please detail what reasonable outcome or further action you are expecting:** |
| *For example, state if you wish to be allowed to undertake resits, resits to be a first attempt, repeat the year, repeat the year as a first attempt or believe that a correct mark needs to be entered due to an administrative error.**Please note that an appeal will not enable your mark to be raised.* |

**EVIDENCE**

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| **Evidence attached in support of your request for review:***See Guidance document for advice regarding 3rd Party evidence* |
| **Type of evidence:** | **Date of evidence:** |
| *e.g. letter, e-mail, course materials, written statement* |  |
| *e.g. letter, e-mail, course materials, written statement* |  |
| *e.g. letter, e-mail, course materials, written statement* |  |

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| **Please specify the reason(s) why this evidence was not previously provided with your original stage 2 academic appeal:** |
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**SPECIFIC REQUIREMENTS**

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| **Please outline any specific requirements you have for which reasonable adjustments may be needed:** |
| *For example, please note if you require correspondence to be in a specific font and/or size* |

**STUDENT SUPPORT**

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| **For many students the impact of a disability or medical condition on studies can be minimised with appropriate assistance. It is your responsibility to look after your health and emotional wellbeing and the University Wellbeing and Disability Service can provide confidential individual advice and support.****If you are currently NOT registered with the Wellbeing and Disability Service, and you believe that you have a medical condition or disability, which affects your ability to study, you MUST contact the Wellbeing and Disability Service to find out if there is any support available for you.** **Further details on the Wellbeing and Disability Service can be found by visiting:** [**http://dds.southwales.ac.uk/**](http://dds.southwales.ac.uk/) **or** [**http://thewellbeingservice.southwales.ac.uk/**](http://thewellbeingservice.southwales.ac.uk/)  |

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| **Have you received support from any of the following services:** |
| Disability Service | Yes [ ]  No [ ]  Prefer not to say [ ]  |
| Wellbeing Service | Yes [ ]  No [ ]  Prefer not to say [ ]  |
| Counselling Service | Yes [ ]  No [ ]  Prefer not to say [ ]  |

**DECLARATION**

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| **I declare that the information given above, and any attached corroborating evidence, is accurate and true to the best of my knowledge.****I understand that this form, and the evidence submitted with it, will constitute part of the full case file, which will be made available to appropriate parties on request and shared in line with the relevant Communication Plan[[1]](#footnote-1)[1] and Privacy/Fair Processing Notice[[2]](#footnote-2)[2].***NB Policing Degree apprenticeships programmes only – your employer will be automatically notified of any submissions/ outcomes under this process.* |
| **Signed:** |  | **Date:** |  |

1. [1] Communication plans for each area of casework can be found here: <https://registry.southwales.ac.uk/student-regulations/> [↑](#footnote-ref-1)
2. [2] <http://uso.southwales.ac.uk/ig/dp/> [↑](#footnote-ref-2)