



Sancta Maria College Appeals Application Form

Fill in the top section and hand into the Principal's Nominee within five school days of getting your assessment back

Name	Home Room Class:
Date of Application	
Subject	
Name of Teacher	
Standard number and title	
Grade Awarded:	<input type="checkbox"/> I have discussed my grade with my subject teacher in the first instance.
Date of assessment returned to student	
<p>Reason for appeal I would like the HOD / Principal's Nominee to reconsider my grade. My reasons for this request are: <i>(please explain, using an extra sheet if needed)</i></p> <p>_____</p> <p>_____</p> <p>_____</p>	

HOD or Other Moderator's Decision	
<input type="checkbox"/> The grade awarded or decision by the teacher stands. <input type="checkbox"/> The decision or grade awarded has been changed to _____	
<i>The reason for this decision has been explained to me and I accept the decision.</i>	
Student Signature: _____	Date: _____
HOD Signature: _____ (HOD)	Date: _____
Principal Nominee's Decision	
<input type="checkbox"/> Principal Nominee's Grade Decision _____ Principal Nominee's Comment: _____	
Signed: _____ (PN)	Date: _____