|  |  |
| --- | --- |
| Name of Student |  |
| Course Code |  | Course Title |  |
| Subject of appeal (tick one) | Assessment [ ]  | Student Behaviour [ ]  |
| In your own words, what is the basis of your appeal? If you need help to complete this form speak to the Student Adviser |
| Staff member |  | Date |  |

|  |
| --- |
| **For College use only** |
| Date received |  | Date of hearing |  | FORAP 7.1.2 issued |  |
| Members of Panel (including job title) |  |
| Result of Appeal |  | FORAP 7.1.3 issued |  |
| Additional notes |

This form can be submitted via the following methods:

• Via email to: learnerappeals@nclan.ac.uk

• Hard copy to: Assistant Principal: Education and Student Success