



Student Notice of Appeal Form

This form is for coursework and prospective students wishing to appeal a decision of AIHE. Before completing the form, please refer to the Student Grievances, Complaints and Appeals Policy (PLA14) and related Procedure (PRA14.1). You are also encouraged to contact the Student Support Officer for advice.

1. STUDENT DETAILS

| | | | |
|---------------------------|--|-----------------------|--|
| Family name | | First name | |
| Student ID | | Course | |
| AIHE email address | | Contact number | |

2. APPEAL DETAILS

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| <p>2.1 Who made the decisions you are appealing? Tick one box only</p> | <p><input type="checkbox"/> Course Coordinator</p> <p><input type="checkbox"/> Head of School</p> <p><input type="checkbox"/> Teaching and Learning Committee</p> <p><input type="checkbox"/> Student Misconduct Committee</p> <p><input type="checkbox"/> Academic Board</p> <p><input type="checkbox"/> Other: _____</p> |
| <p>2.2 Date of written Notice of Decision (i.e. decision letter)</p> | |
| <p>2.3 Are you appealing against: Tick one or both box/es</p> | <p><input type="checkbox"/> A finding about the allegation (unless you admitted to academic or student misconduct)</p> <p><input type="checkbox"/> The penalty imposed</p> |
| <p>2.4 What is the ground of your appeal? You must tick at least one and provide relevant additional information in support of your appeal, otherwise you have not submitted a valid appeal.</p> | |
| <p><input type="checkbox"/> New evidence of a relevant nature is available You must specify what this new evidence is, explain why it was not reasonably available during the investigation or hearing at the time of the decision, and how this could have affected the decision in your case.</p> | |
| <p><input type="checkbox"/> The decision was made without due consideration of relevant facts, evidence or circumstances You must set out what relevant facts, evidence or circumstances you consider were not duly considered and how this could have affected the decision in your case.</p> | |



| | |
|--------------------------|--|
| <input type="checkbox"/> | <p>There was bias, prejudice or a conflict of interest by the investigative or hearing body. You must state who you consider was affected by bias, prejudice or a conflict of interest and explain the evidence of this bias, prejudice or conflict of interest and how this could have affected the decision in your case.</p> |
| <input type="checkbox"/> | <p>Some significant policy or procedural irregularity occurred in the investigative or decision-making process. You must specify which policy or procedure was not followed in the investigation or decision-making process, how it was not following and say how this could have affected the decision in your case.</p> |
| <input type="checkbox"/> | <p>There was a breach of the rules of natural justice with the potential to affect the outcome of the investigation or hearing. You must set out how you say that rules of natural justice were not followed and say how this could have affected the decision in your case.</p> |
| <input type="checkbox"/> | <p>An excessive penalty was imposed. You must set out why you say the penalty was excessive.</p> |

3. SUBMISSION OF THE NOTICE OF APPEAL

Your written appeal must be delivered to the Student Support Officer, Head of School or General Manager not more than 20 working days after you would receive the written notice of the decision by email. If you do not submit you appeal within this time, your appeal cannot be considered.

| | |
|-------------------|--------------|
| Signature: | Date: |
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Privacy Statement: The information on this form is collected for the primary purpose of considering your appeal. Other purposes of collection include recording the date you signed the form, attending to academic and administrative matters and statistical analyses. You have a right to access personal information that AIHE holds about you, subject to any exceptions in relevant legislation. If you wish to seek access to your personal information or inquire about the handling of your personal information, please contact the Student Support Officer.

Office Use Only

Date notice of decision received by student:

Date notice of appeal received by AIHE:

Name of recipient:

Referred to: Date referred: