

Appeals Lodgement Form			Appeals No.	
SECTION 1 – Personal Details				
Name:		Title:	<input type="checkbox"/> Mr	<input type="checkbox"/> Mrs
			<input type="checkbox"/> Ms	<input type="checkbox"/> Miss
Address:		Post Code:		
Email:		Tel/ Mobile:		
SECTION 2 – Course / Unit/ Module Details				
Code/Title :		Date:	/	/
Assessor:				
Task:				
SECTION 3 – Appellant Declaration				
I have read and understood the Action Training Academy Appeals Policy and acknowledge that Action Training Academy will use an independent assessor to resolve this appeal, and that I will be given the opportunity to present my case formally at an interview. Should the appeal progress to an external arbitrator, I agree to pay the arbitrator fee for this appeal; however should my appeal be successful I will receive a full refund of this fee.				
Signature :		Date:	/	/
SECTION 4 – Appeal Details				
Please tick the area relating to your grounds for appeal:				
<input type="checkbox"/>	Incorrect assessment decision	<input type="checkbox"/>	Inappropriate assessment task/process	
<input type="checkbox"/>	Bias of the assessor	<input type="checkbox"/>	Faulty, inappropriate or lack of equipment	
<input type="checkbox"/>	Lack of competence of assessor	<input type="checkbox"/>	Inappropriate assessment conditions	
<input type="checkbox"/>	Incorrect information provided regarding assessment			
Please outline the situation for your appeal: <i>Note: Use "Appeals Progress Form" to record further actions regarding this Appeal</i>				
Appeal discussed with the Assessor :		<input type="checkbox"/> YES	<input type="checkbox"/> NO	
Appeal has been successfully resolved:		<input type="checkbox"/> YES	<input type="checkbox"/> NO	
Admin Use Only				
<input type="checkbox"/>	Appeal Form Received (Admin)	Initial	Date:	/ /
<input type="checkbox"/>	Appeal Lodgement recorded (Register)	Initial	Date:	/ /
<input type="checkbox"/>	Letter of Acknowledgement sent	Initial	Date:	/ /
<input type="checkbox"/>	Appeal Forwarded to Director	Initial	Date:	/ /

