

Appeal Number



Assessment Outcome Appeal Lodgement Form

Student to complete when wishing to request an Assessment Outcome Review

Date of lodgement of the appeal:

Name:

Course:

Course Start Date:

Course End Date:

Ph/Mobile:

Details of the Assessment Outcome Appeal

(Please enter as much detail as you can to assist Career Keys in addressing your concerns. You may attach additional sheets if required)

Location of Assessment(s):

Name of Trainer/Assessor Involved:

Unit(s) of Competency assessed:

Type of Assessment (Please tick the appropriate box/es):

- WRITTEN QUESTIONS AND ANSWERS
- EXAMINATION
- ORAL QUESTIONING
- PRACTICAL DEMONSTRATION: OBSERVATIONS AND CHECKLISTS
- CASE STUDIES AND PROBLEM SOLVING: DISCUSSION AND WRITTEN RESPONSES
- ROLE PLAY OR WORKPLACE SIMULATION
- PORTFOLIO OF COMPLETED WORK
- PROJECT
- THIRD PARTY REPORTS FROM WORK PLACEMENT SUPERVISOR
- OTHER

Have you talked to your trainer/assessor about this issue?

Yes / No

Appeal Details

(Explain why you believe the assessment outcome was incorrect or other reasons for your assessment outcome appeal)

What, if any, response or action do you seek or expect?

I declare that I have provided all details in an accurate manner, to the best of my knowledge.

Student:
(Signature)

Date:

Please tick:

I fully completed this Form.

This Form was completed on my behalf by _____

Signature:

Office Use Only

- This appeal was acknowledged within 48 hours of receipt (copy attached).**

(Circle) YES NO Initial of Authorised Officer:

- The Student has been notified in the event that it is expected that the appeal will require more than 60 days to resolve (copy attached).**

(Circle) YES NO N/A Initial of Authorised Officer:

- Career Keys' Operations Manager has been notified and this appeal has been entered onto Career Keys' Continuous Improvement Register and will be monitored to closure.**

(Circle) YES NO Initial of Authorised Officer:

Date(s) Assessment Decision Reviewed by Trainer/Assessor:

Decision Taken (with justification):

Name of RTO Delegate:

Signed:

Date:

- The student has received writing advice of this review outcome and the student's right to progress the review to the Senior Trainer (copy attached).**

(Circle) YES NO Initial of Authorised Officer:

- Career Keys' Operations Manager has been notified of the decision.**

(Circle) YES NO Initial of Authorised Officer:

- Student records have been amended (if appropriate).**

(Circle) YES NO Initial of Authorised Officer:

Date(s) Assessment Decision Reviewed by Senior Trainer:

Decision Taken (with justification):

Name of RTO Delegate:

Signed:

Date:

- The student has received writing advice of this review outcome and the student's right to progress the review to an independent party (copy attached).**

(Circle) YES NO Initial of Authorised Officer:

- Career Keys' Operations Manager has been notified of the decision.**

(Circle) YES NO Initial of Authorised Officer:

- Student records have been amended (if appropriate).**

(Circle) YES NO Initial of Authorised Officer:

**Notification of Request for an independent Review received within 5 calendar days by the student.
Yes / No**

If no, completed appeal documentation with all evidence submitted to the Compliance & Finance Officer to include on Complaints & Appeals File and Continuous Improvement Register.

Date:

Initial of Authorised Officer:

If yes, resolution agency notified and date set for resolution session.

Date and time of session:

Location:

- The student has received writing advice of this resolution session and the student's right to bring a third party (copy attached).**

(Circle) YES NO Initial of Authorised Officer:

- Post resolution session, the matter was resolved and a copy of the independent's decision is attached.**

(Circle) YES NO Initial of Authorised Officer:

- Student has received formal notification of this final decision (copy attached).**

(Circle) YES NO Initial of Authorised Officer:

- Student records have been amended (if appropriate).**

(Circle) YES NO Initial of Authorised Officer:

- Completed appeal documentation with all evidence submitted to the Compliance & Finance Officer to include on Complaints & Appeals File and Continuous Improvement Register.**

(Circle) YES NO Initial of Authorised Officer:

