

# REVIEWS AND APPEALS

## Student Application Form

### REVIEW OR APPEAL

By completing this form, you are requesting to have Intelligent Training Solutions review or appeal a judgment made against you. This form serves to begin the appeal process in relation to a judgment that has been made against you. A written response will be issued to you within 14 days.

#### Application Fees

There are no fees involved to apply to have your judgment reviewed or appealed internally by Intelligent Training Solutions.

As a student you also have the right to request that certain external agencies review Intelligent Training Solution's decisions, however, external fees not related to Intelligent Training Solutions may apply for this type of service.

#### How to apply for a Review or Appeal

This Form must be lodged to: **Intelligent Training Solutions: Administration Office, PO BOX 322 Riddells Creek, Victoria 3431** or emailed to [admin@its.vic.edu.au](mailto:admin@its.vic.edu.au).

NOTE: An application for a review or appeal must be made within 21 days from the date of your judgement or assessment outcome.

### APPLICATION TO REVIEW OR APPEAL

ITS STUDENT NUMBER	I	T	S	0	0	0				
--------------------	---	---	---	---	---	---	--	--	--	--

Title     Mr.     Mrs.     Miss.     Ms.     Dr.     Other

Legal Given Name		Middle Name	
Legal Family Name		Date of Birth	___ / ___ / ____
Telephone (Home)		Mobile Number	
Address			
Email Address			

# REVIEWS AND APPEALS

## Student Application Form

### APPLICATION OF REVIEW DECISION

What is the review decision or outcome that you are appealing? The decision must be the result of an application for review, as set out in the Review and Appeals policy and procedure.

Decision Type*	<input type="checkbox"/> Academic progress outcome or decision	<input type="checkbox"/> Cancel of enrolment due to non-payment of fees
	<input type="checkbox"/> Misconduct outcome and sanction	<input type="checkbox"/> Other reviewable decision in relation to fees (e.g remission of debt)
	<input type="checkbox"/> Complaint outcome	<input type="checkbox"/> Other
	<input type="checkbox"/> Non-attendance notice	<input type="checkbox"/>
Review officer name as indicated in the Review Outcome*		
Review decision as set out in the Review Outcome*		
Date of notification*		

NOTE: An application to appeal must be received within 21 days of being notified of the review outcome.

### GROUNDINGS FOR APPEAL

Please select one or more of the following: \*

- Relevant evidence, that was not taken into consideration by the review officer and which could not have been known by you prior to the review.
- The decision was manifestly wrong
- A procedural irregularity occurred which may have affected the review officer's decision
- The penalty imposed on you was manifestly excessive
- The review officer failed to make a decision within the time required by the review and appeals policy and procedure.

# REVIEWS AND APPEALS

## Student Application Form

### REASON FOR APPLICATION TO APPEAL

Please specify the reasons for your application to appeal, present any further evidence you believe should be considered, and set out the outcome you desire. \*

### SUPPORTING DOCUMENTS

Attach any documents that support your application to appeal and note them down here.

You may be requested to provide additional information or documentation before your application is considered complete.

### APPLICANT'S DECLARATION

I declare to the best of my knowledge that the information entered and attached to this form is correct and complete.

Intelligent Training Solutions collects, uses and destroys your information in accordance with our Privacy Statement.

I agree to the terms stated above

# REVIEWS AND APPEALS

## Student Application Form



### OFFICE USE ONLY

Received by		Appeal Number Issued	
Date		Given to <Position>	
Date Responded		Follow up Date	

Action Taken

Specify possible improvement based on complaint