**Academic Appeals Form**

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| **Your Details** |
| **Full Name**  |  |
| **Student ID** |  |
| **BIMM Email** |  |
| **Campus** |  |
| **Faculty** |  |
| **Course & Year of Study** |  | **Year** |  |
| **SR Visa Student** |  |

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| **Informal Process** |
| Please outline how you have attempted to resolve your appeal informally. You should receive support from your Course Leader, Lecturer, Student Wellbeing in the first instance |
| **Person/s contacted:** |  |
| **Please outline the response:** |
| **Reasonable Adjustments**  |
| Please use the space below to inform the panel of any disabilities, additional needs or Reasonable Adjustments that should be taken into consideration. If this does not apply, skip this section.  |
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| **Grounds for Appeal** |
| Please select the grounds for appeal. You can select one or more grounds depending on your circumstances. You cannot appeal against academic judgement within an Academic Appeal.  |
| **Academic Appeal** (Related to a decision around marks and assessment board decisions) |
|[ ]  1. Mitigating circumstances which, for good reason, the Assessment Board was not made aware of relating to your assessment when it made its decision (e.g., health reasons).
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|[ ]  1. Procedural irregularity where the procedures and regulations of the University have not been complied with and where the validity of the academic result or decision has therefore been undermined.
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|[ ]  1. **There is prejudice of bias in the marking, moderation or Assessment Board proceedings.**
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| **Your Appeal** |
| **Module Code** | **Module Name (Please list below)** |
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| **What does your Appeal relate too?** |
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| **Your appeal -** Please use the space below to outline your appeal: |
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| **Resolution –** Please outline your proposed resolution if the appeal is upheld. This could be:a further attempt at a component of assessment; a revised penalty in relation to a verdict of academic misconduct; any other action to correct procedural irregularity, unfair treatment, prejudice or bias. If you have to resubmit an assessment, this will be communicated to you. |
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| **Supporting Evidence**  |
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| **Type of Evidence (Please list below)** |  |
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| **Representation**  |
| You are entitled to select a friend or other advocate as your representative for the appeals process. This cannot be a legal professional, member of BIMM University staff or your doctor.  |
| **Name**  |  |
| **Surname** |  |
| **Relationship** |  |
| **Email** |  |

**Student Declaration**

By signing this form, you are agreeing that the University can hold and process any data you have submitted for the purposes of investigating your appeal. You are also agreeing that any data you have already submitted to the University for other purposes (such as mitigating evidence claims or assessment scripts) may be collected for investigation.

Students will be notified within 5 days of the Appeals Panel whether their appeal has been successful, and a resolution will be offered. If a student is dissatisfied with the outcome, you can request an internal review within 21 days via the Internal Review Request Form.

Following review, students can request external review within 12 months via the [OIA.](https://www.oiahe.org.uk/)

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| **Student signature** | **Date**  |
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Please return this form along with any supporting evidence to: cap@bimm.co.uk