Sydney Secondary College
QUALITY ■ OPPORTUNITY ■ DIVERSITY
BLACKWATTLE BAY CAMPUS

Student Appeal Form

Student Name: _____

Student Number: _____

Student Statement in Support of Appeal

Attach any documents if required.

My appeal is based on the following grounds:

Course: : _____

Assessment Task : : _____

The Principal / Assessment Review Committee will advise you of the outcome of the School Review of your appeal.

Student's Signature: _____Date: _____

Parent/Guardian's Signature: _____Date: _____

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Assessment Review Report Form

Student Name:_____

Student Number:_____

Course(s) under review

Only list those courses in which the student has appealed.

Course Name	Assessment Task Number	Outcome of School Review (Upheld/Declined)

Principal's/ Assessment Review Committee's Response

The Principal / Assessment Review Committee must address the matters raised by the student in his/her appeal and detail why the appeal has either been upheld or declined.

Course: _____ Appeal Decision: UPHELD / DECLINED (please circle)

Reason(s):
.
Principal's Signature:_____ Date: _____