

Educational Appeal Application Form

*Tauira must complete and submit this Form to Te Karumārama* *within 20 working days of being notified of the decision of the Takiwā Academic Committee.*

*This Form can be sent by email to* [*legal@twoa.ac.nz*](mailto:legal@twoa.ac.nz) *(or sent to Te Puna Mātauranga – Te Wānanga o Aotearoa PO Box 151, Te Awamutu 3840 addressed to Appeals - Te Karumārama), with supporting documents, attached.*

**SECTION A: To be completed by Tauira**

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| --- | --- |
| **Details Section** | |
| **Full Name:** |  |
| **ID Number:** |  |
| **Programme/Course Name:** |  |
| **Kaiako / Kaitiaki Name:** |  |
| **Postal Address:** |  |
| **Phone Number:** |  |
| **Email Address:** |  |

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| **I am appealing an educational review decision:** |

Please outline the specific reasons / details for requesting the appeal in the box provided and or by attaching a separate sheet.

Please note appeals will only be considered where there was/is:

* additional information that was not available to the Takiwā Academic Committee;
* material defects in the application of the review and or appeals process to the Tauira; and / or
* material irregularity in the conduct of assessments or in the resulting process.

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Please list here the documentation you have attached in support of your review request

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| --- | --- |
| **Document** | **Reason for providing this document:** |
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**Declaration:**

* I declare that the information I have provided is true and correct.
* I understand that the information associated with this educational review will only be used for the purpose of this review and will not be released to any persons not involved in the enquiry.
* I understand that a complete record of this appeal will be held by Te Wānanga o Aotearoa.

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| --- | --- |
| **Tauira Signature:** |  |
| **Date:** |  |

**SECTION B: Te Puna Mātauranga Use Only**

**Refer:**

* Regulation 16 – Educational Reviews and Appeals (Tikanga Ako)
* Educational Review and Appeals Tikanga Here

**Review Table:**

|  |  |
| --- | --- |
| **Date received** |  |
| **Assigned Reviewer: Investigator – Te Karumārama** |  |
| **Outcomes:**   * Appeal declined under 7.2 of Educational Review and Appeals Tikanga Here | |
| * Recommendation made to Te Rautiaki Mātauranga to: | |
| * Appeal approved with actions to be taken in response (if any) | |
| * Appeal declined with outline of reason | |
| Chairperson of Te Rautiaki Mātauranga (or delegate)   * Name: * Signature:………………………………………………………………………………………….. * Date: | |
| **Recordkeeping:** | |
| * Tauira notified of decision by letter | |
| * Letter and relevant evidence filed | |