**Educational Review Form**

* Tauira must complete and submit this form
* Timeframe for an Education Review is 20 working days
* Submission of the completed Educational Review form, including all supporting documentation
* Subject line to state: Educational Review

**Emailed to:**

|  |  |  |
| --- | --- | --- |
| Te Ihu  | Northland, Auckland | Edreviewti@twoa.ac.nz  |
| Te Waenga  | Coromandel, Bay of Plenty, Gisborne-East Coast, Waikato, King Country, Taupo | Edreviewtw@twoa.ac.nz  |
| Te Kei | Hawkes Bay, Taranaki, Whānganui, Manawatu, Wairarapa, Wellington, South Island | Edreviewtk@twoa.ac.nz  |

Please complete this form and attach any supporting documents:

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

|  |
| --- |
| I am requesting a review of an Educational decision about *(tick one)* |

|  |  |  |
| --- | --- | --- |
|  |  | Credit Award or Cross Credit application |
|  |  |  |
|  |  | Compassionate consideration application |
|  |  |  |
|  |  | Assessment misconduct |
|  |  |  |
|  |  | Assessment |
|  |  |  |
|  |  | Assessment in Te Reo |
|  |  |  |
|  |  | Assessment result |
|  |  |  |
|  |  | Extension |
|  |  |  |
|  |  | Resubmission/Re-assessment |
|  |  |   |
|  |  | ***Any other decision made under Tikanga Ako (Educational Regulations) are to be considered through the Tauira Complaints Process.*** |
|  |

Please give your reasons for requesting the review; either here or on a separate sheet.

**Be as specific and detailed as possible.**

|  |
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|  |

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

|  |  |
| --- | --- |
| Document | Reason for providing the document |
|  |  |
|  |  |
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* 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 review will be held by Te Wānanga o Aotearoa.

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