

Higher Level 4/5 Academic Appeal Application Form

2024-25

Before completing this form, please read the College's Higher Level 4/5 Student Academic Appeals Policy, Regulations and Procedures document, and the Higher Level 4 Framework for Assessment in Higher Education.

SECTION 1: Personal and course information

TITLE (e.g., Mr, Mrs, Ms, Miss, Other)	
FAMILY NAME(S)	
FORENAME(S)	
STUDENT NUMBER (as shown on Bolton College student card)	
YEAR OF STUDY (e.g., first year)	
FULL TIME OR PART TIME	
NAME OF PERSONAL TUTOR (optional)	
CORRESPONDENCE ADDRESS: (The outcome letter will be sent to this address, which must correspond with a postal address held on the College's student record system.)	
CORRESPONDENCE EMAIL ADDRESS: (To be used to acknowledge your appeal and, if applicable, request further information. Your College email will also be used.)	
PLEASE LIST THE MODULE NAME(S) AND THE CODE(S) YOU WISH TO APPEAL	
DATE OF THE PUBLICATION OF THESE MODULE RESULTS	
DATE OF SUBMISSION OF YOUR	

APPEAL	

SECTION 2: GROUNDS FOR APPEAL.

You should read the following permissible grounds for appeal carefully. You are not permitted to appeal on any other grounds. In particular, appeals will not be accepted simply because you are dissatisfied with an assessment mark or grade. I wish to appeal against the decision of the Assessment Board on the grounds that (State YES in one or more of the relevant boxes).

Circumstances affected the student's performance of which, for good reason, the Assessment Board may not have been made aware when the decision was taken and which might have had a material effect on the decision (Note: if students wish to appeal on such grounds, they must give adequate reasons with supporting documentation why this information was not made available prior to the decision being made). PLEASE COMPLETE SECTION 3	YES/NO
There was a material administrative error or procedural irregularity in the assessment process or in putting into effect the regulations for the programme of study of such a nature as to cause significant doubt whether the decision might have been different if the error or irregularity had not occurred. PLEASE COMPLETE SECTION 4	YES/NO
There is evidence of prejudice or bias or lack of proper assessment on the part of one or more of the examiners. PLEASE COMPLETE SECTION 5	YES/NO

ALL APPLICANTS MUST COMPLETE SECTIONS 6 AND 7.

SECTION 3: CIRCUMSTANCES AFFECTING PERFORMANCE 3.1 Did you report any illness or other factor using the Mitigating Circumstances procedure before the meeting of the Assessment Board? If YES: Please complete sections 3.2 and 3.5. If NO: Please complete sections 3.3, 3.4 and 3.5	YES/NO
3.2 Please specify below to whom the circumstances were reported and provide full details of the illness or other factor you have reported previously. If there are any additional circumstances that have not been previously reported, please complete sections 3.3, 3.4, and 3.5	

3.3 Please provide details of the illness or other factor that you did not report previously. Appeals on medical grounds will not be considered without written evidence (original document not a photocopy), form a medical practitioner or other health professional, which should be submitted with this form.	
3.4 Please state why you did not report the circumstances detailed in 3.3 above using the College's Mitigating Circumstances Procedures before the meeting of the Assessment Board.	
3.5 Please state why you believe the circumstances detailed in 3.2 above had an adverse effect on your academic performance.	

SECTION 4: MATERIAL ADMINISTRATIVE ERROR/PROCEDURAL IRREGULARITY

4.1 Please state why you believe there has been a material administrative error or why some procedural irregularity has occurred

4.2 Please state why you believe the material administrative error or irregularity has had an adverse effect on your academic performance

SECTION 5: EXAMINER PREJUDICE OR BIAS OR LACK OF PROPER ASSESSMENT

5.1 Please state why you believe there has been prejudice or bias on the part of the examiner or lack of proper assessment

5.2 Please state why you believe that the prejudice or bias on the part of the examiner or lack of proper assessment has had an adverse effect on your performance

SECTION 6: ATTEMPTS TO RESOLVE

6.1 Please state what attempts you have made to resolve the above issues informally (i.e., who did you communicate with about the issues and what was the outcome?)

SECTION 7: DECLARATIONS

All applicants SHOULD complete this section.

If you have included information as part of this appeal about an illness, physical or learning disability or mental health condition, which may be classed as a disability (e.g., lasting more than twelve months) and have not already disclosed this to the College, it may be in your best interests to do so (irrespective of the outcome of your appeal). The College Student Support Services may then be able to offer you advice and guidance and potentially longer term adjustments to the way you are taught and/or assessed. If you do **not** wish us to share this information with the Disability Service then please indicate in the box below.



I do **NOT** wish to have any details disclosed on this form shared with the College Student Support Service.

I declare that the information I have provided on this form is a true statement of the facts to the best of my knowledge and belief. I also declare that the attached documentary evidence (if any) is a true reflection of my circumstances/bona fide evidence from an approved third party.

Signed (Candidate):	Date:	
(Ganalate).		

Please note that failure to correctly or fully complete the appeal application form could result in your appeal not being accepted.

Please send your completed appeal form and evidence via your College email address to: HE Academic Quality Leader Deane Road Bolton BL3 5BG Tel: 01024 482017 Jill.Hebden@boltoncc.ac.uk

If you are submitting the documents by hand, please submit to the Principalship on Floor 3 at Deane Road and make sure that the envelop is labelled clearly as a Higher Education Appeal.

Supporting evidence

Supporting evidence should be provided to support your application and should be attached to the Appeal Form. Please note that you are responsible for gathering and submitting the evidence that supports your appeal: the College will not gather evidence on your behalf. If you are submitting medical notes or official documents such as death certificates, please ensure you submit the original version of the document and take a photocopy first. <u>Original documents should be sent by recorded delivery</u>.

Data Protection Policy:

https://www.boltoncollege.ac.uk/assets/Uploads/Bolton-College-Data-Protection-Policy-2024-26.pdf