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| **Appellant Details** |
| Name: | Click or tap here to enter text. |
| Student Id #: | Click or tap here to enter text. |
| Contact details: | Click or tap here to enter text. |
| Date: | Click or tap here to enter text. |

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| **If Assessment Decision - Appeal Details** |
| Course: | Click or tap here to enter text. |
| Unit(s) of competency relevant to the Appeal: | Click or tap here to enter text. |
| Assessment tasks(s) relevant to the appeal: | Click or tap here to enter text. |
| Assessor name: | Click or tap here to enter text. |

| **Appeal Details** |
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| Please outline the decision you want to appeal:*Please include an outline of the matter in detail**What happened?**When did items occur?**Who was involved?* | Click or tap here to enter text. |
| Why do you consider this decision is incorrect? | Click or tap here to enter text. |
| What actions would you like to happen in order to resolve this issue? | Click or tap here to enter text.Click or tap here to enter text. |

***Office use only:***

| ***Appeal Processing – MTA Training and Employment RTO Representative***  |
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| *Appellant type:* | [ ]  Student [ ]  Student Representative [ ]  Student (Minor / Child) | [ ]  Client[ ]  RTO Staff Member[ ]  Stakeholder | [ ]  Third Party Partner [ ]  Other: |
| *Immediate action taken (if any):* | Click or tap here to enter text. |
| *The due date for a response:* | ASAP and by:Click or tap here to enter text. |
| *Date written acknowledgement sent:* | Click or tap here to enter text. |
| *Appeal handling process allocated to:* | Click or tap here to enter text. |
| *Further appeal details:* | Click or tap here to enter text. |
| *Re-assessment process undertaken:* | Click or tap here to enter text. |
| *Other actions taken to resolve appeal:* | Click or tap here to enter text. |

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| *Appeal outcome:* | Click or tap here to enter text. |
| *Continuous Improvement Record raised:* |  Click or tap here to enter text.Include reference number if applicable |
| *Actions taken to prevent reoccurrence:* | [ ]  Update to course / training product[ ]  Provision of additional information[ ]  Amended system / policy / procedure[ ]  Personnel training conducted[ ]  Personnel support undertaken[ ]  Other:Click or tap here to enter text. |
| *Written confirmation to Appellant:* | [ ]  Attached Date despatched: Click or tap here to enter text. Method of despatch:Click or tap here to enter text. |

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| General Manager name & signature: | Click or tap here to enter text. | Date: | Click or tap here to enter text. |