



Application for a Review of Grade

HOW TO APPLY

1. The INFORMAL CONSULTATION process MUST be completed prior to making application for a Review of Grade (ROG)
2. While an INFORMAL CONSULTATION may be given for each assessment task, only ONE REVIEW OF GRADE per unit is permitted.
3. To apply, students must complete and submit this form to the Dean within **10 working days** of the release of grades.
4. Applications will not be accepted before the release of grades.
5. Please refer to the Review of Grade policy for further information.
6. Failure to complete this form correctly may result in a processing delay.

PERSONAL DETAILS

This section must be completed in full.

Student Number: _____

Title: _____ Family Name: _____ Given Names: _____

Postal Address: _____ State: _____ Postcode: _____

Daytime telephone Number: _____

Student Email Address: _____

Course Code: _____ Course Name: _____

Semester: _____

COURSE DETAILS FOR REVIEW OF GRADE

Please complete a new application for each Unit.

Unit Code: _____ Unit Name: _____

Did you have a supplementary **exam/assessment** or a **deferred exam/assessment**? Yes No

Please indicate whether the informal Consultation process has been undertaken for: Assignment Exam

You MUST have undertaken and Informal Consultation process to apply for Review of Grade

Please include details about where, when and with whom the Informal Consultation/s was/were held or the examination script was viewed.

| Assessment Item (Including exam) | Staff Member consulted | Date | Method of Contact | Original mark awarded (NA for exams) | Outcome |
|----------------------------------|------------------------|------|-------------------|--------------------------------------|---------|
| | | | | | |
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| | | | | | |

Final grade awarded for the course



OFFICE USE ONLY

SECTION A – TO BE COMPLETED BY DEAN

Date application received: ____/____/____

Has the student undertaken informal consultation? Yes No

Review of grade allowed? Allowed Disallowed (If disallowed go to section c)

Reasons

Please provide a statement as to reasons why this decision was reached, which may be included in a letter sent to the student.

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Signature: _____ Date: ____/____/____

SECTION B – TO BE COMPLETED BY THE INDEPENDENT MARKER

Recommendation: Mark / grade stands New mark / grade

Reasons

Please provide a statement as to the decision and the reasons why this decision was reached and include any recommendation for increase of mark awarded which may be included in a letter sent to the student.

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Signature: _____ Date: ____/____/____

SECTION C – TO BE COMPLETED BY THE DEAN

| <i>Assessment Item</i> | <i>Mark before ROG</i> | <i>Mark after ROG</i> |
|------------------------|------------------------|-----------------------|
| | | |
| | | |
| | | |

Signature: _____ Date: ____/____/____

Method and date student notified of outcome