

Assessment Offence Appeals Form

| Name: | |
|----------------------|--|
| Address: | |
| Student Number: | |
| Candidate Number: | |
| Email address: | |
| Telephone number: | |
| Examination: | |
| Examination date(s): | |

PLEASE SELECT YOUR GROUNDS FOR APPEAL BY TICKING THE RELEVANT BOX(ES) BELOW:

| There is evidence of bias, prejudice or discrimination as defined by the UK Equality Act 2010 | |
|---|--|
| Relevant information received by the Assessment Offence Assessor had not been taken into consideration | |
| There is evidence of a substantial procedural irregularity with respect to an aspect of the conduct of the investigation and/or determination of outcome | |

Please summarise your appeal (use additional sheets where necessary):



List all documents/evidence appended in support of this appeal:

DECLARATION

I hereby state that I have read and accept the Assessment Offence Policy and Procedures. I enclosepayment as required, and understand that if my appeal is not successful the fee will not be refunded. Furthermore, I understand that disagreeing with an academic judgement does not constitute grounds for appeal.

| SIGNATURE: | |
|-------------|--|
| PRINT NAME: | |
| DATE: | |

A fee is payable and must accompany this form:

1. Assessment Offence outcome appeal

Cheques should be made payable to

CIPFA

Please return to the Quality & Compliance team at gualitycompliance@cipfa.org



Policy version and owner

| Policy owner | Head of Qualifications & Membership |
|--------------------|-------------------------------------|
| Version | 1.0 |
| Update | September 2022 |
| Approval | SMB 05 September 2022 |
| Policy review date | September 2023 |

Regulatory references

| Ofqual General Conditions of Recognition | |
|--|--|
| Condition A6: Identification and management of risks | |
| Condition A7: Management of incidents | |
| Condition A8: Malpractice and maladministration | |
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