Hibernia College Quality Framework

## REVIEW APPLICATION FORM

Read this form carefully, then complete sections 1 and 2 and submit it as a Word document via your student email along with any supporting evidence to [**AAO@hiberniacollege.net**](mailto:AAO@hiberniacollege.net)

THIS FORM WILL BE COMPLETED AND RETURNED TO YOU AS NOTIFICATION OF THE OUTCOME OF YOUR REVIEW

As indicated in the ***Appeals Policy****,* Learners may choose from one of the two following options when seeking to challenge a decision specified in the ‘Right to challenge a decision’ section of the Appeals Policy. **This form relates to the process for an appeal to a formal decision maker, the first of these options.**

|  |
| --- |
| **A review is** an appeal where a learner formally requests the maker of a formal decision, or a person acting on their behalf, to review that decision, i.e. reconsider it in the light of concerns expressed by the appellant under one or more of the three grounds of appeal.  **An appeal is** where a learner formally requests that the decision or judgement of a lower authority is referred to a higher authority, that is the Appeals Committee, for the reconsideration of the decision or judgement in the light of concerns expressed the appellant under one or more of the three grounds of appeal. |

# Student Information and Declarations (completed by the student)

## Student Details

|  |  |
| --- | --- |
| **Name** | Click to type your name here. |
| **Student Number** | Type your student name here. |
| **Programme** | Select your programme title from the drop-down menu. |
| **Programme Cohort** | Click to type your cohort here. |

## Checklist and Declaration

*Note: Do not submit this application until you have completed this checklist and signed below. Applications for review incur a fee which is refunded if your review is upheld. The review service will not be delivered until payment is received.*

|  |  |  |
| --- | --- | --- |
| **Statement** | | **Tick** |
| I have read and understood the **Policy for Appeals** and the associated **Procedure for Review of a Provisional Assessment Decision** before completing Section 2 below. [These are available on [www.HiberniaCollege.com/quality-framework](http://www.HiberniaCollege.com/quality-framework). For any clarifications, contact [AAO@hiberniacollege.net](mailto:AAO@hiberniacollege.net)] | |  |
| I authorise a member of the Hibernia College Finance Team to contact me to charge my credit/debit card in line with the **Supplementary Fee Regulations** as payment of the fee for this service. | | |
| *CA (excluding research project): €60* | |  |
| *Research Project: €175* | |  |
| *Examination: €150* | |  |
| *Placement Module: €60* | |  |
| I have included verifiable evidence in support of my application. | |  |
| I have completed this form to the best of my knowledge and included all relevant information. | |  |
| I understand that it is my responsibility to demonstrate that I have grounds for a review. | |  |
| I understand that applying for a review may affect my right of appeal against the future decision of the Board of Examiners | |  |
| I confirm the information provided is accurate per my knowledge. | |  |
| Dated | Click or tap to enter a date. | |

# Student Assessment Information (completed by the student)

## Assessment Review

|  |
| --- |
| **Identify the assessment you wish to have reviewed.** |
| Enter the assessment you wish to have reviewed here. |

## Grounds

*Note:* *This section gives you the opportunity to choose the grounds you wish to appeal under and explain why they are appropriate.*

|  |  |
| --- | --- |
| **Grounds for Appeal** | **Tick** |
| **Evidence that Hibernia College did not follow an established procedure in the making of a decision.** |  |
| **Circumstances or information of which the original decision-making body was not aware when its decision was taken, and there is a valid, substantiated reason why that information was not made available by the student.** |  |
| **Evidence of substantive bias by one or more of the decision-makers in arriving at a decision.** |  |
| Use this space to explain why your chosen grounds are appropriate. | |

## Evidence

*Note: Remember that the college* ***will not*** *consider appeals that are not supported by verifiable evidence that the grounds you have mentioned above are valid.*

|  |  |  |
| --- | --- | --- |
| **Summarise the evidence you have in support of your appeal, which may be appended to your application.** | | |
| **Summary of Evidence** | **Type of Evidence** | **Submitted** |
| Click or tap here to enter text. | Click or tap here to enter text. |  |
| Click or tap here to enter text. | Click or tap here to enter text. |  |

# Determinations (completed by the College)

## Verification Checklist

|  |  |
| --- | --- |
| **Question** | **Tick** |
| Received within the review window (5 working days)? |  |
| Supplementary fee paid? |  |
| Student declaration complete? |  |
| Supporting evidence received? |  |
| **Completed by:** Enter the assessment you wish to have reviewed here. | |

## Decision on Grounds and Validity of Application

|  |  |  |
| --- | --- | --- |
| **Question** | **Yes/No** | **Name of Decision-Maker** |
| Review to Proceed? | Choose an item. | Enter the assessment you wish to have reviewed here. |

# Review Report (completed by the College)

|  |  |
| --- | --- |
| **Review by (faculty member)** |  |
| **Original Assessor** |  |
| **Original Assessment Decision** |  |
| **Reviewed Assessment Decision Outcome** |  |
| **Rationale for decision including evidence relied upon** |  |
| **Consequences of Decision** |  |

# Completed by:

|  |  |
| --- | --- |
| Name |  |
| Date | Click or tap to enter a date. |