Internal Appeals form – Jersey College for Girls

FOR JCG USE ONLY

Date received

Reference No.

Please tick box to indicate the nature of your appeal and complete all white boxes* on the form below

- Appeal against an internal assessment decision and/or request for a review of marking
- Appeal against the centre's decision not to support a clerical re-check, a review of marking, a review of moderation or an appeal
- □ Appeal against the centre's decision relating to access arrangements or special consideration
- ☐ Appeal against the centre's decision relating to an administrative issue

^{*}Where the nature of the appeal does not relate directly to an awarding body's specific qualification, indicate N/A in awarding body specific detail boxes

Name of appellant		Candidate name (if different to appellant)	
Awarding body		Exam paper code	
Qualification type Subject		Exam paper title	
Please state the	e grounds for yo	ur appeal below:	
(If applicable, tick below)			
 Where my appeal is against an internal assessment decision, I wish to request a review of the centre's marking 			
If nec			this form is being completed hard copy being completed
Appellant signature: Date of signature:			Date of

Template for issuing internally assessed tasks (NEAs) to students

Student Name	•
	mber:
Subject:	
Exam Board :	
Unit/Assessme	nt Name :
,,	
Your mark (tha	t will be submitted to the exam board) is either in the box below or
Please read th	e following statements, sign and return this sheet (which your teacher
	rely for this exam series)
	I confirm that I have been informed of my mark in this assessment
2.	I am aware that I may request copies of materials to assist me in considering whether to request a review of the centre's marking of the assessment. These materials will be provided promptly if you request them from your teacher
3.	I am aware that I now have time (usually 5 school days) to review copies of materials and reach a decision about whether to request a review of the centre's marking
4.	I am aware that any requests for reviews of marking must be made in writing. The request must be well grounded, state the reason for lack of confidence in the marking and clearly identify why the marks could not have been reasonably awarded using the existing marking criteria
5.	I am aware that this allows sufficient time for the review of marking to take place prior to my teacher submitting marks to the Exam Board
6.	I am aware that any review of marking is carried out by an assessor who has appropriate competence, has had no previous involvement in my assessment and has no personal interest in the review
7.	I am aware that my marks could be decreased or increased as a result of the review
8.	I am aware that any internal marking is still subject to change when moderated by the Exam Board
Signed (Studer	nt) :

Date:.....