

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 a decision to reject candidate's work on the grounds of malpractice
- 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

*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 | | Exam paper title | |
| Subject | | | |

Please state the grounds for your 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 necessary, continue on an additional page if this form is being completed electronically or overleaf if hard copy being completed

Appellant signature:

Date of signature: