

Student request for assessment review
(This form relates to the TAFE NSW Higher Education assessment procedure)

This section is to be completed by the student.

Student name: _____

Student number: _____

Course code & name: _____

Subject code & name: _____

Semester/Year: _____

Teacher's name: _____

Campus (TAFE College you are attending): _____

Class /day/ time: _____

Assessment title: _____

Submission Due date: _____

I am requesting a review of my assessment.

I have discussed my assessment and reasons for requesting a review with my teacher.

Yes – on date: _____

No

Provide reason/s for the request. You should reference the assessment requirements and marking criteria to justify your reasons for a review.

Student Signature: _____ Date: _____

Return this form to the teacher or course coordinator at your campus.

Staff use only:

Reason/s given are sufficient YES / NO

Request has been granted YES / NO

Outcome:

Comments:

Staff Name: _____

Position:

Staff Signature: _____

Date:

TAFE NSW Higher Education Assessment Procedure can be accessed at:

<https://www.tafensw.edu.au/about/policies-procedures/higher-education>