

**INTERNAL ASSESSED MARKS**

**APPEAL FORM**

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| CANDIDATE NAME: |  | CANDIDATE NUMBER: |  |
| EXAM SEASON: |  |  |  |
| SUBJECT |  | LEVEL |  |
| ORIGINAL MARK: |  | POST APPEAL MARK: |  |
| I wish to review my work to consider an appeal (if No do not complete the section below.) | | YES/NO |  |
| I wish to appeal my mark on the following grounds: | | | |
| Signature of Candidate Signature of Parent/Carer | | | |
| Date Received: | |  | |
| Date of Review of work: | |  | |
| Signature of invigilator to confirm work reviewed under secure conditions: | |  | |
| Reviewer: | |  | |
| Reviewers comments: | | | |
|  | | | |
| DATE CLOSED: | |  | |
| STUDENT NOTIFIED: | |  | |

NOTES:

* An appeal for a Review of Marking of Centre Assessed Marks must clearly include the grounds for the appeal.
* Appeals can only be made on the basis of application of the mark scheme or failure to adhere to JCQ or awarding body regulations.
* The mark scheme is accessible on the relevant subject area of the awarding body website.
* The form must be received by the subject lead by the relevant deadline(s).
* If a candidate wishes to review their work before submitting an appeal then the section detailing grounds should not be completed. The form will be returned following access to the work to allow the candidate to proceed if they still wish.
* Access to work will be supervised at all times under secure conditions and a copy of the mark scheme will be made available.