CIPFA The Chartered Institute of Public Finance & Accountancy

Assessment Appeals Form

Name	
Address	
Email address	
Telephone number	Student contact number
Examination centre	Candidate number
Examination date	
Subject / module	

Please select the grounds for your appeal	
☐	An assessment decision was biased or discriminatory
☐	All the relevant information was not taken into consideration although provided within the set timeframes
☐	Substantial procedural irregularity.

A fee is payable and must accompany this form.

All modules £75/IPDS £200

Please make cheque payable to CIPFA

Please summarise your appeal	**List documentation attached to this form**

I hereby state that I have read and accept the Examination Appeals Policy. I enclose payment as required, and understand that if my appeal is not successful the fee will not be refunded. Furthermore, I understand that disagreeing with an academic judgement does not constitute grounds for appeal.

Signed Date:

Please return to Customer Service Manager Education and Membership, CIPFA, 3 Robert Street London WC2N 6RL