

Application Form for Re-Checks and Reviews

General Information

- Before completing the form please read *Carlow College Procedures for Academic Re-Checks, Reviews and Appeals*.
- Please complete in BLOCK LETTERS or in TYPESCRIPT
- Please email completed form to <u>officeoftheregistrar@carlowcollege.ie</u> no later than five working days following the issue of results

| Personal Details | | | | |
|---------------------------|-------------------------|------------------|--------|-----------------------------|
| Name: | | | | |
| Programme: | | | Stage | |
| Student ID No | | | | |
| | | | | |
| Assessment to be re-o | checked or reviewed | | | |
| Academic Year: | | | | |
| Date of issue of results: | | | | |
| Which module(s) do y | ou wish to be re-checke | ed or revi | iewed? | Give titles and lecturer(s) |
| Module Titles | | Lecturer name(s) | | |
| | | | | |
| | | | | |

| Which process are you applying for? | | | | |
|-------------------------------------------------|-----|----|--|--|
| Tick the appropriate boxes | Yes | No | | |
| Are you seeking a re-check? Fee: €20 per module | | | | |
| Are you seeking a review*? Fee: €70 per module | | | | |

If seeking a REVIEW, you <u>must</u> indicate the grounds on which the review is being sought by filling in the next two sections.

If seeking a RECHECK you can proceed straight to submission, having signed the form at the end.

| Grounds for a Review | | |
|------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------|
| Indicate the grounds upon which this request is made. (Tick whichever is most appropriate [you may tick more than one. Then complete the Statement below.) | | Tick all that apply |
| 1. | There were compassionate or extenuating circumstances that may have affected the results which were not known at the time of assessment and which were not considered by the Board of Examiners. | |
| 2. | Evaluation of assessed material was erroneous and did not comply with the published grading criteria. | |
| 3. | One or more of the results was significantly out of sequence with other components assessed within or across modules. | |
| 4. | There were procedural or administrative errors in the assessment or the examination process or the processing of assessment results. | |

Statement (300 words max)

Please explain the basis for your review request here. You should elaborate on the grounds which were ticked above. You should refer to any supporting documents which you are submitting.

| Supporting Documentat | tion |
|------------------------------------|--------------------------------------------------------------------|
| | ing documentation here. You should scan and submit such |
| documentation with your | form. Please ensure that documentation is appropriate and legible. |
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