

NOTICE OF APPEAL FORM

INFORMATION FOR STUDENTS

1. This form is to be completed by a student who is lodging an Appeal to the Appeals Committee (academic appeals) or the GM, National Operations (non-academic appeals). The form should be used when seeking a review of a Kaplan decision e.g. Notice to report for unsatisfactory academic progress, a complaint outcome, or a misconduct outcome.
2. This completed form and any supporting documentation must be submitted to the registrar@kbs.edu.au within ten (10) working days of the student receiving a notice of intention to report, complaint outcome or misconduct outcome.
3. Before this form is submitted, you must ensure you have valid grounds of appeal and sufficient documentary evidence to support your appeal. Failure to provide this information may lead to your appeal being immediately dismissed.
4. Please refer to the Grievances, Complaints and Appeals Handling Policy (at kbs.edu.au) for more information.

USE BLOCK LETTERS WHEN COMPLETING THIS FORM AND PLEASE KEEP A COPY.

STUDENT DETAILS

Title <input type="checkbox"/> Mr <input type="checkbox"/> Ms <input type="checkbox"/> Other (please specify):		Please tick as appropriate <input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Unspecified	
Family name		Given name(s)	
Date of birth (dd/mm/yyyy)	Student ID		
Telephone (home/mobile)			
E-mail			
Full address			
Suburb	State		
Postcode	Country		

DETAILS OF EVIDENCE SUPPORTING APPEAL

Provide the following information (attach additional pages if required).

Grounds of Appeal:

Please tick the grounds on which this appeal is being made:

- new evidence of a relevant nature has since become available
- the original decision was made without due consideration of relevant facts, evidence or circumstances
- there was bias, prejudice or a conflict of interest by the investigative or hearing body
- some significant policy/procedural irregularity occurred in the investigative or hearing process

SUPPORTING EVIDENCE

Describe here:

Please also tick this box to confirm additional evidence has been attached to justify what has been specified above.

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Outcome sought	
Student signature	Date (dd/mm/yyyy)

Forward completed form and supporting documentation to the Registrar at registrar@kbs.edu.au

OFFICE USE ONLY	
Received by	Form received date (dd/mm/yyyy)
Processed by	Form processed date (dd/mm/yyyy)

Privacy: Kaplan Business School collects personal information about you for the purposes of administering your enrolment in your chosen education course(s) or program(s) of study. We may not be able to process your request if you do not provide all of the information requested on this form. We may disclose personal information about you in accordance with our **Privacy Policy** including to your education agent, and to the Australian government as required or authorised by law. Our Privacy Policy contains detailed information about how you can access and correct the personal information we hold about you, or make a privacy complaint. You may contact the Privacy Officer at privacy@kaplan.edu.au for more information.

Return this form to your Kaplan Business School Student Experience Team:

Adelaide

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Tel: +61 (0)8 8215 4100
Email: adelaide@kbs.edu.au

Brisbane

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