



<p><b>Important Information:</b></p> <ul style="list-style-type: none"> <li>Appeals form will be provided in accordance with HIC's International Student Complaints and Appeals Policy and Procedure</li> <li>You should read the policy and procedures carefully to establish your eligibility for an appeal</li> <li>Any request for a student's appeals must be made in writing, using this form</li> <li>Before your form for an Appeal will be considered, you must complete all the sections below and attach documents relevant to your application</li> </ul>	<p><b>Appeal Number:</b> HICAN00_____ (Office Use Only)</p> <p><b>Reason for Appealing:</b></p> <p><input type="checkbox"/> Academic assessment</p> <p><input type="checkbox"/> Intension to report for Unsatisfactory course progress</p> <p><input type="checkbox"/> Intension to report for Nonpayment of fees</p> <p><input type="checkbox"/> Refund refusal</p> <p><input type="checkbox"/> Intervention</p> <p><input type="checkbox"/> Release letter refusal</p> <p><input type="checkbox"/> Special consideration in relation to an individual student</p> <p><input type="checkbox"/> Suspension / deferment / cancellation of enrolment</p>
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**Checklist**

- I have indicated the grounds for appeal and addressed these in my submission.
- I have attached copies of all my supporting documentation

**Personal Details**

Family Name:		Given Name:	
Student ID:	Group:	Email:	Mobile:
Address:			
Course(s) Name:			

\* If you change your address during the period, please contact us to ensure your address details are updated for future correspondence.

**Details of the Appeal**

**Please provide a summary of your appeal in the space below (Attach Separate Sheet, if needed)**

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**Declaration:** I declare to the best of my knowledge and belief, the above information contained on this form is correct and complete. I hereby agree to be bound by the Rules and Regulations of Harward International College. I authorise Harward International College to release information to any approved educational or migration related government bodies at their request.

Student signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Document Control**

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**To be completed by Harward**

Appeal Number: HICAN00\_\_\_\_\_ (use this reference number in the follow up – form)

Date of meeting with student: \_\_\_\_\_

Who attended the meeting (Minimum 2 People should be in the meeting):

1. \_\_\_\_\_ (Student Name)
2. \_\_\_\_\_ (Relevant Staff)
3. \_\_\_\_\_ (Relevant Staff)

What action has been proposed in relation to the Appeal? \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Should the decision made by Harward earlier be upheld? Yes / No

Rationale: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

If there any remedial action required by Harward? Yes / No

If Yes, what action is proposed? \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Follow up required? Yes / No

If Yes, what action is proposed? \_\_\_\_\_

Signature of Relevant Staff(s) : \_\_\_\_\_

Dated: \_\_\_\_\_

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