Request for Review Form (Qualification Exclusion)

(Please note: Must be returned by 12 noon on Friday 19 January 2024)

Ingoa Name:	
Nama Ākonga Student ID Number:	Tohu Mātauranga Qualification, e.g. BSc:
Te kaupapa rāhui Excluded from:	
 Please outline the special circumstances beyond your control which temporarily affected your study. Also, please state whether your special circumstances (such as illness or bereavement) have been resolved, outline any steps taken to resolve the special circumstances, and specify any actions you are taking to ensure that you will now be able to be successful in your study. Ensure that you have attached evidence for your special circumstances, e.g. a signed doctor's medical certificate, a notice of bereavement. Please explain why you did not apply for Special Consideration at the time your special circumstances occurred? 	
 If required, would you like to attend a review of your exclusi If yes, are you able to attend a review meeting on <u>Thursday</u> If you wish to attend in person, but are unable to do so on the might be considered: 	25 January 2024? YES NO this date, please advise us so that alternative arrangements
Note: You may bring an advocate and a support person to to Would you like to be referred to UCSA Welfare & Advocate and a support person to to the support person to to the support person to the sup	acy for advocacy or support? YES NO
Te Rā Date:	Waitohu Signature:

Send your completed form to:

Academic Quality Assurance Unit

Imēra | Email: <u>academicprogress@canterbury.ac.nz</u>

Please note:

Must be returned by 12 noon on Friday 19 January 2024 with supporting evidence.