

**THE PNG UNIVERSITY OF TECHNOLOGY**  
**FORM FOR APPEAL AGAINST AN ASSESSMENT OR EXAMINATION**

**CHECKLIST FOR REQUIREMENTS: (Tick in the box if included)**

1. K100 Application Processing fee


4. Continuous Assessment Marks


2. Certified Medical Certificate

5. Copies of Tests/Assignments

3. Special Consideration Form

6. Strictly One (1) Fail

**APPEAL GUIDELINES**

***(Please read the following appeals guidelines before completing this form)***

- (a) All appeals against failure are to be lodged within 7 days after the Academic Board meeting.
- (b) Students should discuss their personal and family problems with appropriate Counselor in Student Services, as, and when they arise during the Semester. Ongoing problems brought to the attention of University authorities only after examinations are held, will not normally be considered as valid grounds for appeal.
- (c) Problems which arise immediately before or during the examination period, particularly medical problems, should be documented whenever possible. Supporting evidence, in addition to this form, should be submitted. The original (not a photocopy), should be submitted or a certified copy.
- (d) Receipt of K100.00 Processing Fee must be submitted together with the Appeal Form to the Chairman of Academic Appeals Committee. Processing Fee will be refunded if Appeal is successful.
- (e) Appeals against Two or More Fails in one Semester will not be considered.

**SECTION 1: (To be completed by Student)**

Name: \_\_\_\_\_

ID NO: \_\_\_\_\_

Department: \_\_\_\_\_

Program: \_\_\_\_\_

**State the Subject and Grade which you are appealing e.g MA111/F, PH102/F etc.**

**State whether you are Appealing Against Fail or Other Grades**

**State Reasons for Appeal:**

- (1) \_\_\_\_\_
- (2) \_\_\_\_\_
- (3) \_\_\_\_\_
- (4) \_\_\_\_\_

**Documents attached (e.g. Medical):**

Have you appeal for Special Consideration?

Yes

☐

No

☐

Tick Appropriate Box

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

SECTION 2: ( To be completed by the Subject Lecturer)

• **Score of the student in the failed subject**

a) Continuous Assessment mark of the student

1) Assignments \_\_\_\_\_ out of \_\_\_\_\_

2) Quizzes \_\_\_\_\_ out of \_\_\_\_\_

3) Test 1 \_\_\_\_\_ out of \_\_\_\_\_

4) Test 2 \_\_\_\_\_ out of \_\_\_\_\_

5) Test 3 \_\_\_\_\_ out of \_\_\_\_\_

6) Others (projects, labs etc) \_\_\_\_\_ out of \_\_\_\_\_

**Sub-total:** \_\_\_\_\_ out of \_\_\_\_\_

(b) Final Examination mark of the student

**Sub-total:** \_\_\_\_\_ out of \_\_\_\_\_

(c) Total mark obtained by the student (a + b) \_\_\_\_\_

**Sub-total:** \_\_\_\_\_ out of \_\_\_\_\_

(d) Other subject(s) failed by the student (if any) \_\_\_\_\_

(e) Weighted average mark of the student for the semester \_\_\_\_\_

(f) Class attendance (1%) \_\_\_\_\_

• **Subjects Performance**

1) Number of students in the class \_\_\_\_\_

2) Mean mark \_\_\_\_\_

3) Maximum mark \_\_\_\_\_

4) Maximum mark \_\_\_\_\_

5) Standard deviation

6)  $Rs = \frac{\% \text{ CA of the student}}{\% \text{ FE of the student}}$

7)  $Rs = \frac{\% \text{ CA for the class}}{\% \text{ FE for the class}}$

3. Any other information relevant to the appeal

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Signature of Subject Lecturer: \_\_\_\_\_ Name of Subject Lecturer: \_\_\_\_\_

Signature of HOD: \_\_\_\_\_ Name of HOD: \_\_\_\_\_

Section 3: (To be completed by Appeals Committee Chairman)

4. Decision

(1) Accept the appeal ☐

(2) Reject the Appeal ☐

(3) Refer to the case to (student) Disciplinary committee for further investigation and location ☐

(4) Refer the case to the Staff Disciplinary Committee for further information ☐

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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