

ACADEMIC APPEAL FORM

SECTION 1: Appeal from Student / Parent / Guardian			
Name of Student		Current Class	
NRIC/FIN/Passport No		Current Course	
Date of Birth		Contact No	
Name of Guardian/Parent			
Email		Contact No	
Nature of Appeal	<input type="checkbox"/> Review of Course Placement <input type="checkbox"/> Review of Marks for Examination <input type="checkbox"/> Others		
Details of Appeal			
<i>(Please provide the details on a separate paper if the space provided is insufficient)</i>			
Signature of Student		Date	
Signature of Parent/Guardian		Date	
SECTION 2: For Official Use Only			

Confidentiality Clause: St Francis Methodist School is committed to maintaining the confidentiality of the students’ personal information and undertakes not to divulge any of the students’ personal information to any third party without prior written consent of the student subject to the obligation of SFMS to disclose to any Singapore government authority any information relating to the student in compliance with the law and/or organization conferring/awarding the qualification.

Handled by (<i>Name of School Staff</i>)		Signature	
Designation			
Evaluation of Appeal			
Recommendation			
Name			
Reason for Recommendation		Reason for Non-Recommendation	
Course Co-ordinator	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Academic Head	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Vice Principal (Academic)	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Principal/Vice Principal	<input type="checkbox"/> Approved <input type="checkbox"/> Not Approved		Date
	Signature		
Action Taken:			
Follow-up by (<i>Name of Officer</i>)		Date	

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