# **AA2A**

# **Stage 2A REVIEW OF STAGE 1 ACADEMIC APPEAL form**

* Before completing this form please read University Regulation 17: <http://www.bath.ac.uk/regulations/Regulations.pdf>.
* This form and further guidance are also available at [http://www.bath.ac.uk/registry/appeals/](http://www.bath.ac.uk/registry/appeals/index.htm).
* You should use this form ONLY if you are requesting a review of an academic appeal because the decision of the Chair of the Board of Studies was that you did not establish a prima facie case. If you have not already submitted an Academic Appeal in accordance with Regulation 17, please complete the AA1 form instead of this one. If you are seeking a review of the outcome of an appeal hearing or executive action, please complete form AA2B instead.
* Please sign and date the form before returning it. The form must be submitted to the Director of Academic Registry no later than 14 calendar days after you were informed of the decision of the Chair of the Board of Studies. Requests for Review of an Academic Appeal received after this deadline will not normally be considered.

**Advice and assistance**

You are advised to seek advice on your case before submitting this form.

* Independent advice is available from the Students' Union Advice & Support Centre. The Centre can be contacted on 01225 386906 or via email at: [suadvice@bath.ac.uk](mailto:suadvice@bath.ac.uk). Details can be found on the Students’ Union website at: <https://www.thesubath.com/advice/academic>.
* Advice for doctoral students is also available from the Independent Adviser for Postgraduate Research Students: <http://www.bath.ac.uk/campaigns/support-for-doctoral-students/>
* If you are a student on a Licensed programme with the Learning Partnerships Office, you should seek advice from your College Students’ Union/Student Services.

1. **Your details**

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| --- | --- | --- | --- | --- | --- | --- |
| **Title:** | Click here to enter text. | **Student no:** | | | Click here to enter text. | |
| **First Name:** | Click here to enter text. | **Surname/Family name:** | | | Click here to enter text. | |
| **Contact address** | | | **Alternative contact address (during University vacation periods)** | | | |
| Click here to enter text. | | | Click here to enter text. | | | |
| **Postcode:** | Click here to enter text. | | **Postcode:** | Click here to enter text. | | |
| **Tel (Landline):** | Click here to enter text. | | **Tel (Landline):** | Click here to enter text. | | |
| **Mobile no:** | Click here to enter text. | | **Mobile no:** | Click here to enter text. | | |
| **University e-mail:** | Click here to enter text. |  | **Home**  **e-mail:** | Click here to enter text. | |  |
| *Please indicate which email address you would prefer the University to use to communicate with you during the course of the Review of an Academic Appeal by ticking the appropriate box above. If you do not indicate a preference your University email will be used as the primary address for correspondence. If you would prefer us to communicate by letter to your postal address rather than by email, do not enter email addresses in the boxes above.* | | | | | | |

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| **Department/School** | |
| Click here to enter text. | |
| **Programme of Study** | **Year of Programme:** |
| Click here to enter text. | Click here to enter text. |

1. **Your reasons for seeking a Review of an Academic Appeal outcome**

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| What are your reasons for asking for a Review of the Academic Appeal outcome?  *You are reminded that your request “must not seek to challenge any decisions taken by the Board of Studies other than those cited in the Academic Appeal”, (Regulation 17.38(c)) and that “It must not make reference to grounds other than those cited in the Academic Appeal, except for those arising from the student’s dissatisfaction with the process or outcome of the consideration of the Appeal by the Chair of the Board of Studies” (Regulation 17.38(d)).* |
| I am requesting a Review of a decision that I did not establish a *prima facie* case in my appeal because: |
| Click here to enter text. |
| *Use a continuation sheet if necessary* |

## Supporting documentation

I am providing the following documentation in support of my request for a Review:

|  |  |
| --- | --- |
|  | A written statement outlining my case for Review (required as above) |
|  | All the documentation I submitted in the Academic Appeal (required) |
|  | The following additional evidence (please specify).  *You should supply evidence supporting you written statement above, especially in relation to your dissatisfaction with the process or outcome. Where you are submitting evidence that was not provided as part of your original Academic Appeal, but is relevant to the grounds for appeal, you must also provide an explanation as to why you could not reasonably have been expected to have submitted this evidence as part of your original appeal.*  Click here to enter text.  Click here to enter text |

|  |  |  |  |
| --- | --- | --- | --- |
| **Signature or typed name:** | Click here to enter text. | **Date:** | Click here to enter text. |

This completed form should be submitted with all documentary evidence and personal statement to the Director of Academic Registry ([dep-acad-reg@bath.ac.uk](mailto:dep-acad-reg@bath.ac.uk)).

Receipt of the form will be acknowledged by email, or in writing if you have sent it by post. The timescales set out in Regulation 17.39 will apply to consideration at Stage 2A.

*Any personal information which is received in the course of dealing with your Academic Appeal will be treated as confidential. Such information will be kept, used and shared, where necessary and appropriate with other members of University staff, only for the purpose of investigating and determining the outcome of your Appeal.*