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| **Appeal against an assessment decision form** |

**Please complete the fields below and return this form to:** **assessments@archaeologists.net**

**About you:**

|  |  |
| --- | --- |
| Your name |  |
| Your email address |  |
| Your training provider |  |
| Your employer during your apprenticeship |  |

**About your appeal:**

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| Please state the full qualification title that the assessment in question relates to:  |
|  |
| Please state any relevant KSB standards that the assessment in question relates to:  |
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| Please explain why you feel an incorrect assessment decision has been made.  |
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*CIfA use only:*

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| I have reviewed this complaint and can confirm that I will instigate the following actions:  |
|  |
| Name | Role at CIfA centre | Date |
|  |  |  |