



Graduate School

ASSIGNMENT RESULT APPEAL APPLICATION 20

STUDENT NUMBER

Grid for student number

SEMESTER

1 2

ASSIGNMENT

1 2

PLEASE READ THE FOLLOWING INSTRUCTIONS BEFORE COMPLETING THIS FORM (IN BLOCK LETTERS USING A BLACK PEN).

- 1. Please refer to the Calendar of Events for closing dates as published in the Prospectus.
2. Please indicate your marking query in detail in the "Detailed Marking Query" column. This is not an application for a general remark and therefore ONLY your specific query will be looked at.
3. Complete one application form per module and submit a colour scan of your complete marked assignment with the application form.
4. Please email to assessments@immgs.ac.za.
5. The outcome of the Assignment Result Appeal will be published no later than the date published in the Calendar of Events.
6. No late applications will be accepted.

SECTION A: STUDENT DETAILS

TITLE Prof Dr Mr Ms Other

GENDER Male Female

SURNAME As per ID document PREFERRED NAME

FIRST NAME(S) As per ID document

ID NO

CELL NO

E-MAIL ADDRESS (Compulsory)

SECTION B: MODULE AND MARKING QUERY DETAILS

Table with columns: Module, Question Number, Detailed Marking Query, Module Code, Marker Feedback, Mark Change (if applicable). Includes sub-headers 'To be completed by Student' and 'Office use only'.

SECTION C: STUDENT DECLARATION

I understand the IMM Graduate School policies and agree to abide by the rules stated therein.

SIGNATURE DATE / / 20

FOR OFFICE USE ONLY

This confirms that the marks, as indicated above, have been adjusted (if applicable) for the above mentioned module on the student's academic record.

STAFF MEMBER NAME

SIGNATURE

DATE / / 20

FINAL MARK FOR ASSIGNMENT: