



Mission: To inspire learner success and community development through innovative learning in an inclusive and diverse environment.

Vision: Ever to excel in a global society.

Values: We value learner achievement, academic excellence and personal growth founded on our longstanding principles of: people-centred and respect, accountability and integrity, inclusiveness and collaboration, continuous self-improvement, innovation and pride.



STUDENT APPEAL

Student Name: _____ Program/Year: _____

Contact Number(s)/email address: _____

Submit within five working days of decision being rendered.

Description of Decision or Issue Being Appealed:

Reasons for Appeal:

Resolution Sought:

Attachments: _____

Signature of Student: _____

Date: _____

LEVEL 1 - REVIEW BY DECISION MAKER

Decision Rendered:

Reasons for this decision:

Deadline date and time for further Appeal: (within 2 working days) _____

Person to Whom Further Appeals Should Be Directed: (Decision Maker's Supervisor) _____

Signature of Decision Maker: _____

Date _____

I WISH TO GO TO LEVEL 2:

Reasons to proceed to Level 2:

Signature of Student: _____

Date: _____

LEVEL 2 – REVIEW BY SUPERVISOR OF DECISION MAKER

Decision rendered:

Reasons for this decision:

Deadline date and time further appeal: (within 3 working days) _____

Person to Whom Further Appeals Should be Directed: _____

Signature of Supervisor: _____

Date: _____

I WISH TO GO TO LEVEL 3:

Reasons to proceed to Level 3:

Signature of Student: _____

Date: _____

LEVEL 3 – Review by Vice President

Decision Rendered (Final)

Reasons for this decision:

Signature of Vice President

Date