

**Appeals Form  
Lloyds International College (VET)**

**First Name:**

**Last Name:**

**Student ID number:** CRI

**Email:**

**Mobile number:**

**Course Name** *(please write the course name):*

**Reason for student appeal** *(please tick the main type of issue your appeal relates to):*

- I received the Warning letter due to low course progress
- I received the Intention to Report letter (ITR) due to low course progress
- Other *(please write details)* eg. Sick, accident

**Appeal details:**

*Please provide specific details of what your appeal is about. **If your appeal is in relations to Warning letter or Intention to Report letter, you must provide the reason(s) for your low academic progress and attach supporting evidence and documents demonstrating compassionate and/or compelling reason(s) for your appeal. If it is for other matters please also provide any evidence if available.***

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**Supporting evidence and documents provided:** *(please specify what documents you attached to this appeal)*

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**Student Signature:**

**Date:**

*I declare that the information I have provided in this Appeal form and on the attached documentation is true and correct in every detail. Where the supporting statement or/and document is attached, I authorize the College to seek further information directly from the originating source. Information collected on this form can be provided, in certain circumstances, to the Australian Government and designated authorities. In other instances information collected on this form can be disclosed without your consent where authorized or required by law. The authority to collect this information is contained in the Education Services for Overseas Students Act (ESOS) 2000, ESOS 2001 and the National Code of Practice for Registration Authorities and Providers of Education and Training to Overseas Students 2019. I understand that this appeal will be investigated and I will receive a written response within 10 (ten) working days.*

**OFFICER USE ONLY**

*If you are student, please do **NOT** fill in this part. Please leave this page blank.*

Refer students to see the school counselor  YES  NO

**Counselor Feedback or Recommendation** *(Academic Manager will make final decision base on facts presented at all stages of this appeal)*

**Academic Manager Use Only**

Appeal  Successful

Appeal unsuccessful

Required action:

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I informed the student of the appeal outcome on \_\_\_\_\_ date

Method used: (circle one) Letter Email Verbal Phone Other (explain)

Signed by: \_\_\_\_\_ Academic Manager

**Unsuccessful appeal** *(this section to be used in case appeal is unsuccessful):*

Notification date of unsuccessful outcome \_\_\_\_\_

Reporting date to the DHA (Immigration) \_\_\_\_\_

Final outcome: \_\_\_\_\_