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| **Internal appeals form**  Summer 2020 awarding | FOR CENTRE USE ONLY | |
| Date received |  |
| Please tick box to indicate the nature of your appeal and complete all white boxes on the form below | Reference No. |  |

Appeal against the centre’s decision not to seek any information the awarding body holds that would be needed for an appeal

| Name of appellant |  | Awarding body |  |
| --- | --- | --- | --- |
| Candidate name  if different to appellant |  | Qualification type  Subject |  |
| Please state the grounds for your appeal below:  If necessary, continue on an additional page if this form is being completed electronically or  overleaf if hard copy being completed | | | |
| Appellant signature: Date of signature: | | | |

Appeal against the centre’s decision not to appeal to the awarding body

This form must be signed, dated and returned to the exams officer on behalf of the head of centre to the timescale indicated in the internal appeals procedure