

## RESULT AMENDMENT FORM



Complete this form in BLOCK LETTERS.

Purpose of this form is for lodging the result amendment for **ONE (1) student**.

### STUDENT DETAILS

First Name:	<input type="text"/>
Last Name:	<input type="text"/>
Student ID:	<input type="text"/>
Email:	<input type="text"/>
Course:	<input type="text"/>

### UNIT DETAILS

Unit Code:	<input type="text"/>
Unit Name:	<input type="text"/>
Assignment Name and Number:	<input type="text"/>
Assignment Percentage:	<input type="text"/>

### TEACHING PERIOD

Block: (if applicable)	<input type="text"/>
Trimester:	<input type="text"/>
Year:	<input type="text"/>

### REASON FOR RESULTS AMENDMENT

Reviewed Result:	<input type="text"/>
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#### Reason for Result Review

**Original Grade and Mark:**

**Amended Grade and Mark:**

**Finalisation of WH** (Withheld result Standard)

**Finalisation of WHE** (Withheld result Extended)

**Finalisation of WHC** (Withheld result due to Student Conduct)

**Other:**

Please refer to the AIA Assessment and Grading Policy and Procedure for withheld results (pp 22-23).

## STAFF DETAILS

**First Name:**

**Last Name:**

**Staff ID:**

**Role:** (e.g., Lecturer, Unit Convenor)

**Email:**

**Staff Signature:**

**Date:**

## PRIVACY STATEMENT

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