

STUDENT ID NUMBER


FNU FIJI NATIONAL UNIVERSITY

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 Website: www.fnu.ac.fj

SAS 07A

APPLICATION FOR RECONSIDERATION OF ASSESSMENT

This application is lodged when dissatisfied with the final (end-point) assessment/grade

Please complete all sections of this form.

Please use block letters.

Tick boxes where appropriate

A PERSONAL DETAILS

Surname :	_____	Email Address(es) Work :	_____
Other Name(s) :	_____	Personal :	_____
First Name :	_____	Phone Contact(s) Work :	_____
Date of Birth :	_____	Home :	_____
	(DD/MM/YY)	Mobile :	_____
		Postal Address :	_____

B UNIT/COURSE ASSESSMENT DETAILS

Year: _____	Block Number: _____	Summester Month: _____	
Semester	Trimester	Quarter	Penster
<input type="checkbox"/> 1 <input type="checkbox"/> 2	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5
College :	_____		
Campus/Centre :	_____		
Programme enrolled in :	_____		
Major 1:	Major 2:	Minor :	
Unit / Course Code:	Unit / Course Name:		
Result:	Date: _____ (DD/MM/YY)	Level:	Stage:

C FINANCE DEPARTMENT

Amount Paid: \$ _____	Receipt Number (please attach receipt): _____	
Cashier: _____	Date: _____ (DD/MM/YY)	Stamp: _____
_____	_____	_____
Student Signature	Date (DD/YY/MM)	

D FOR OFFICIAL USE ONLY
STUDENT ACADEMIC SERVICES

Exams Office:	Date Received: _____ (DD/MM/YY)	Stamp: _____
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COLLEGE DEAN

Comments/Recommendation: _____

APPOINTED REVIEWER

Comments: _____			
Before : Course Mark - _____	Final Exam Mark - _____	Total Mark: _____	Grade: _____
After : Course Mark - _____	Final Exam Mark - _____	Total Mark: _____	Grade: _____
Name : _____	Date: _____ (DD/MM/YY)	Stamp: _____	
Signature : _____			

COLLEGE DEAN

Comments/Recommendation: _____

Signature: _____	Date: _____ (DD/MM/YY)	Stamp: _____
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STUDENT ACADEMIC SERVICES

Comments: _____

 Student record updated and student advised of the outcome above

Exams Office:	Date Received: _____ (DD/MM/YY)	Stamp: _____
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