

**STUDENT DETAILS:** 

## **RE-ASSESSMENT FORM**

Re-assessment Fee is \$200 per unit or subject. Please note that there is **no refund** provided for re-assessment fees.

First Name:			Family	Name:		
Student ID:			Contac	t Numbei	r:	
Address:						
Email Address:						
Course Name:					Group	Name:
Student Signature: Date:/						//
TO BE COMPLETED BY ADMIN:						
Unit Name			Unit Code			Assessment Task/s
TO BE COMPLE	ETED BY ACADEMIC N	1ANAGER:	:			
Assessor Name						
	Assessor Name				Assess	ment Date
	Assessor Name				Assess /	ment Date
	Assessor Name				Assess /	ment Date /
Re-assessment ag	Assessor Name  pproved by Academic Mana	ager	O A	pproved	/	/ Not Approved
	oproved by Academic Mana			pproved	/	/ O Not Approved
				pproved	/	/
Academic Manager	oproved by Academic Mana			pproved	/	/ O Not Approved
Academic Manager TO BE COMPLE	pproved by Academic Mana			pproved	/	/ O Not Approved
TO BE COMPLE Payment approve	pproved by Academic Manar r Signature: ETED BY FINANCE: ed by Finance Officer				/	/ O Not Approved//
TO BE COMPLE Payment approve  Reassessment fee	r Signature:  ETED BY FINANCE:  ed by Finance Officer  e paid - \$200 per unit of su	bject	O Ar	pproved	_ Date:	/ O Not Approved//
TO BE COMPLE Payment approve	r Signature:  ETED BY FINANCE:  ed by Finance Officer  e paid - \$200 per unit of su		O Ar	pproved	/	/ O Not Approved//
TO BE COMPLE Payment approve  Reassessment fee	pproved by Academic Manary r Signature: ETED BY FINANCE: ed by Finance Officer e paid - \$200 per unit of su	bject	O Ar	pproved	_ Date:	/ O Not Approved//

The copy of this form must be kept in the student file for future reference