

Appeal Number:

Decision Appeal Lodgement Form

Appellants to complete when wishing to appeal about a LITA Training decision, including assessment

Date of le	odgement of the Appeal:	
Name of	Appellant (mandatory):	Ph/Mobile:
Course (if relevant):	
(Please er	the Decision you are wishing to appeal nter as much detail as you can to assist LITA Trainin h additional sheets if required)	g in addressing your concerns. You
A. ASSI	ESSMENT APPEAL	
Location	of Assessment(s):	
Name of 1	Frainer/Assessor Involved:	
Unit(s) of	Competency assessed:	
Type of A	ssessment (please tick the appropriate box/es):	
	WRITTEN QUESTIONS AND ANSWERS EXAMINATION ORAL QUESTIONING PRACTICAL DEMONSTRATION: OBSERVATIO CASE STUDIES AND PROBLEM SOLCING: DIS RESPONSES ROLE PLAY OR WORKPLACE SIMULATION PORTFOLIO OF COMPLETED WORK PROJECT THIRD PARTY REPORTS FROM WORK PLACE OTHER	CUSSION AND WRITTEN
Have you	talked to your trainer/assessor about this issue?	Yes / No



Appeal Details

(Explain why you believe the assessment outcome was incorrect or other reasons for your assessment outcome appeal)

What, if any, response or action do you seek or expect?
B. OTHER LITA TRAINING DECISION APPEAL:
Location of Decision:
Name of Staff Member Involved (if known):
Appeal Details
(Explain why you believe the decision was incorrect)
What, if any, response or action do you seek or expect?
I declare that I have provided all details in an accurate manner, to the best of my knowledge.
Appellant Name:
Date: Appellant Signature:
Please tick: □ I fully completed this Form.

Appellant Signature

This Form was completed on my behalf by _____

Next Review: January 2020



Office Use Only This appeal was acknowledged within 48 hours of receipt (copy attached). (Circle) YES NO Initial of Authorised Officer: The appellant has been notified in the event that it is expected that the appeal will require more than 60 days to resolve (copy attached). (Circle) YES NO N/A Initial of Authorised Officer: LITA Training's General Manager has been notified in the case of assessment appeals and this appeal has been entered onto the Complaint & Appeals Register and Continuous Improvement Register and will be monitored to closure. (Circle) YES NO Initial of Authorised Officer: Date(s) Assessment Decision Reviewed: **Decision Taken (with justification):** Name of RTO Delegate: Signed: Date: The appellant has received writing advice of this review outcome and the appellant's right to progress the review (copy attached). (Circle) YES NO Initial of Authorised Officer: LITA Training's General Manager has been notified of the decision in the case of assessment decisions. (Circle) YES NO Initial of Authorised Officer: □ Student records have been amended (if appropriate).

Date(s) Decision Reviewed:	
Decision Taken (with justification):	
Name of RTO Delegate:	
Signed:	Date:

Initial of Authorised Officer:

(Circle) YES NO

Next Review: January 2020



	The appellant has received writing advice of this review outcome and the appellant's right to progress the review to an independent party (copy attached).					
	(Circle) YES	NO	Initial of Authorised Officer:			
	LITA Training's General assessment decisions		nager has been notified of the decision in the case of			
	(Circle) YES	NO	Initial of Authorised Officer:			
	Student records have	been a	amended (if appropriate).			
	(Circle) YES	NO	Initial of Authorised Officer:			
the s If no Mana Regi Date Initia	student. , completed appeal doo ager to include on Com ster. : Il of Authorised Officer	cument nplaints	ependent Review received within 5 calendar days by Yes / No tation with all evidence submitted to the General s & Appeals File and Continuous Improvement and date set for resolution session.			
Date	and time of session: tion:	Jimea (and date set for resolution session.			
			writing advice of this resolution session and the hird party (copy attached).			
		ing a t				
	appellant's right to br	ing a t	hird party (copy attached).			
	appellant's right to br (Circle) YES Post resolution session	ing a the	hird party (copy attached). Initial of Authorised Officer:			
	appellant's right to br (Circle) YES Post resolution session decision is attached. (Circle) YES	ing a the	hird party (copy attached). Initial of Authorised Officer: matter was resolved and a copy of the independent's			
	appellant's right to br (Circle) YES Post resolution session decision is attached. (Circle) YES	NO on, the	hird party (copy attached). Initial of Authorised Officer: matter was resolved and a copy of the independent's Initial of Authorised Officer:			
	appellant's right to br (Circle) YES Post resolution session decision is attached. (Circle) YES Appellant has received (Circle) YES	NO NO NO NO NO NO NO NO	Initial of Authorised Officer: matter was resolved and a copy of the independent's Initial of Authorised Officer: al notification of this final decision (copy attached).			
	appellant's right to br (Circle) YES Post resolution session decision is attached. (Circle) YES Appellant has received (Circle) YES	NO on, the NO od form NO been a	Initial of Authorised Officer: matter was resolved and a copy of the independent's Initial of Authorised Officer: al notification of this final decision (copy attached). Initial of Authorised Officer:			
	appellant's right to br (Circle) YES Post resolution session is attached. (Circle) YES Appellant has received (Circle) YES Student records have (Circle) YES Completed appeal do	NO NO NO NO NO NO NO Cumen Comp	Initial of Authorised Officer: matter was resolved and a copy of the independent's Initial of Authorised Officer: mal notification of this final decision (copy attached). Initial of Authorised Officer: amended (if appropriate).			

Next Review: January 2020