



Astrophoria Foundation Year Admissions Review Request Form

This form is for use in seeking a review by the Director of Undergraduate Admissions of a decision by the Foundation Year Complaints and Appeals Panel in relation to a complaint or appeal relating to the admissions process or an admissions decision.

Please read the Astrophoria Foundation Year Admissions Complaints and Appeals Review Procedure carefully before completing this form.

Your review request must be submitted within 20 days of the Foundation Year Complaints and Appeals Panel decision letter.

Your review request may not be considered if you do not comply with the word limits below.

Date of the decision letter from the Foundation Year Complaints and Appeals Panel:

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Applicant surname/family name: Applicant title:

Applicant first/given name(s):

College applied to:

Name and relationship to applicant, if acting on their behalf:

.....

Email: Tel.:

Degree/Course of study:

.....

1. Briefly articulate your original complaint or appeal to the Foundation Year Complaints and Appeals Panel (Max 500 words):

2. Identify your Ground(s) of Review (as required by the Astrophia Foundation Year Admissions Complaints and Appeals Procedure) (tick all that apply)

1	There was a procedural irregularity or error in the investigation by the Foundation Year Complaints and Appeals Panel	
2	The decision of the Foundation Year Complaints and Appeals Panel was unreasonable	
3	You were not provided with clear reasons for the decision made by the Foundation Year Complaints and Appeals Panel	

3. Set out the reasons why you consider this ground applies / these grounds apply in numbered paragraphs. This should include:

- **Ground 1:** what the procedural irregularity or error in the decision of the Foundation Year Complaints and Appeals Panel is and a summary of the evidence you have which supports this
- **Ground 2:** what aspects of the decision made by the Foundation Year Complaints and Appeals Panel you consider to be objectively unreasonable, and a summary of the evidence you have which supports this (you must identify the relevant paragraphs in the decision letter)
- **Ground 3:** which aspects of the decision you do not consider were supported with reasons or were unclear (you must identify the relevant paragraphs in the decision letter)

(Max 1,000 words, excluding attachments)

Ground 1:
Ground 2:
Ground 3:

4. Provide a numbered list of any supporting evidence you are enclosing with this form. Any such evidence should have page numbers and be provided in the order set out in this list.

(Max 250 words)

<p>1.</p> <p>2.</p> <p>3.</p> <p>4.</p> <p>5.</p>
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5. State in numbered paragraphs the outcome(s) you are seeking

(Max 250 words)

<p>1.</p> <p>2.</p> <p>3.</p> <p>4.</p> <p>5.</p>
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6. Statement by applicant (please tick to indicate your agreement with each statement):

<ul style="list-style-type: none">• I have read the University’s Astrophoria Foundation Year Admissions Complaints and Appeals Review Procedure	
<ul style="list-style-type: none">• I understand that that appeals cannot be upheld on the basis of academic judgement, or any extenuating circumstances that I did not disclose prior to the decision against which I am appealing	
<ul style="list-style-type: none">• I understand that the University may need to process personal details about me, which could include sensitive information, in order to investigate my review request	
<ul style="list-style-type: none">• I understand that the University may need to exchange information about my review request within the University and colleges, and with other persons and organisations, including disclosing this completed review request form and my accompanying evidence where necessary, (for example, to collect information or to seek statements from relevant persons or bodies)	
<ul style="list-style-type: none">• The information I have given on this form is true, correct and complete, to the best of my knowledge	

Signed (applicant):

Signed (authorised representative of applicant):

Date: