**Review of Results**

|  |  |
| --- | --- |
| **Student Name**: | **Student reference number:** |
| **Current Course Title:** | **Current Course Code:** |
| **Exam/unit to review** |  |
| **Reason for review** : | |

Staff agreement statement:

I have discussed that marks and grades can decrease as well as increase as part of the review process.

Staff Name: ………………………………………………………………….. Date: ……………………

Student agreement statement:

I confirm that I understand reviewing my results can increase or decrease the marks and grades I receive.

Student Signature: …………………………………………………………….. Date: ………………………

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