



## Application Form for Re-Checks and Reviews

### General Information

- Before completing the form please read *Carlow College Procedures for Academic Re-Checks, Reviews and Appeals*.
- Please complete in BLOCK LETTERS or in TYPESCRIPT
- Please email completed form to [officeoftheregistrar@carlowcollege.ie](mailto:officeoftheregistrar@carlowcollege.ie) no later than five working days following the issue of results

### Personal Details

Name:

Address:

Telephone Number:

Programme:

Stage

Student ID No

### Assessment to be re-checked or reviewed

Academic Year:

Date of issue of results:

Which module(s) do you wish to be re-checked or reviewed? Give titles and lecturer(s)

**Module Titles**

**Lecturer name(s)**



**Supporting Documentation**

Please list any supporting documentation here. You should scan and submit such documentation with your form. Please ensure that documentation is appropriate and legible.


**Signature**

Applicant's Signature

Date:
