APPEAL COMMITTEE

MARITIME ACADEMY OF MALDIVES
Purpose

To ensure that decisions related to student enquiry and appeals are carried out in a timely and efficient manner and with the best possible outcome in accordance with the institution policies and guidelines.

Appeal committee ensures fair treatment to all when making decisions regarding appeal.

Members

Shahma Abdul Rahman - Registrar
Aishath Shamrath Waheed – Program Leader
Aishath Sugaama – Assistant Manager HR, Admin and Finance

Scope

These decisions will be made within seven days of a request and will be communicated via email or Viber.

Appeal committee will handle those decisions that cannot be decided by a single department alone such as the student desk, registration or finance.

Appeal Process

1. Student Desk receives appeal form (along with supporting documents if required). (Appeal form as in annexure 1 is available on Moodle and from Student Desk)
2. Student Desk contacts relevant department for a response.
3. Student Desk informs the student of decision if it can be taken by specific department.
4. If not, appeal form is forwarded to appeal committee for decision making.
5. Appeal committee will convene within seven days and decision will be taken.
6. Appeal committee will inform student desk about decision taken.
7. Student desk will inform the student of decision taken.
STUDENT ENQUIRY & APPEAL FORM

Personal Information

Full Name: ____________________________
Student Number: ____________________________
Contact Number: ____________________________
Course Name: ____________________________
OCE: ____________________________

Enquiry

☐ Time tables
☐ Examination result
☐ Advanced Standing
☐ Letter
☐ Others (Please specify)

Appeal

☐ Misconduct
☐ Attendance
☐ Requirement to re-sit
☐ Refund/Pardon of fees
☐ Exemptions
☐ Others (Please specify)

Please provide the details of your request:
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

Name ____________________________ Signature ____________________________ Date ____________________________

***PLEASE KEEP A COPY OF THIS FORM FOR YOUR REFERENCE***
*** THIS FORM MUST HAVE YOUR ACTUAL SIGNATURE ON IT TO BE ACCEPTED***

For Campus Use

Form Received by: ____________________________ Sign: ____________________________ Date: ____________________________

Form Completed ☐ Yes ☐ No Date: ____________________________

YOU WILL BE NOTIFIED IF A DECISION CANNOT BE RENDERED DUE TO MISSING/INCOMPLETE DOCUMENTATION OR IF FURTHER EXPLANATION IS REQUIRED. YOU WILL BE CONTACTED THROUGH THE INFORMATION YOU PROVIDED AT THE TOP OF THIS DOCUMENT.

Office of the Student Desk

Decisions / Actions by: ☐ Head of Student Services ☐ Academic Committee ☐ Finance Manager

Decisions / Actions Taken:

Decision / Action Communicated to Student:

Medium: ☐ Viber ☐ Email

Communicated By ____________________________ Date ____________________________ Sign ____________________________