



## APPLICATION FOR LEARNER APPEALS

Name of person appealing: .....

Student number: .....

Student ID number: .....

Contact details: Tel (H) .....

Tel (W) .....

Cell .....

E-mail .....

Course: .....

Subject: .....

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What is the nature of your appeal?

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Date of the incident that you are appealing against:

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Details of the appeal (add motivation to your appeal):

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.....  
Signature of person appealing

.....  
Date of submission of this application

.....  
Damelin Correspondence College signatory

.....  
Date