

Form E-4

(3) Major reasons for the appeal (Summary).

- (a) Academic:.....
- (b) Social:.....
- (c) Medical:.....
- (d) Others: (specify).....

(4) List of supporting documents attached per major reasons raised by the appellant (including copy of the appeal fee receipt).

- (a)
- (b)
- (c)
- (d)

(5) Declaration by appellant:

I declare that the information provided under section 1, 2, 3 and 4 is correct and true.

Signature Date

Part B: Views by the Program Coordinator plus any attachments

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NameSignature Date

Part C: Views by the Head of Department plus any attachments

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NameSignature Date

Part D: Views by the Director of Academic Support Services (DASS) plus any attachments

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NameSignature Date