



**FACULTY OF HUMANITIES
APPEAL APPLICATION FORM**

Student name and number: _____

Department: _____ **Qualification:** _____

Date: _____

APPLICABLE RULE: G _____

Prevailing circumstances:

Assistance that was sought:

* I approached the Lecturer/Supervisor/HOD/Director

YES	NO
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* Name of the Lecturer/Supervisor/HOD/Director _____

* What kind of assistance was offered? _____

* I went for counselling services

YES	NO
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(Attach a copy of the report from Counselling)

* I informed a lecturer about my problem

YES	NO
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* Name of the lecturer _____

* I went to Financial Aid for assistance

YES	NO
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What is your future plan to prevent similar problems from occurring?

DATE OF THE SCHOOL APPEAL COMMITTEE:

APPROVED by School:

YES	NO
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