



KEITH GRAHAM ACADEMY

NVQ LEVEL 2 HAIRDRESSING 3008/52

The Keith Graham Academy Trainees Appeal Form /TA1

**Details of Appeal ( to be completed by the trainee):**

Trainee Name: \_\_\_\_\_

Work Place: \_\_\_\_\_

Date Appeal was Raised: \_\_\_\_\_

Appeal Lodged with: \_\_\_\_\_

Assessor: \_\_\_\_\_

Internal Verifier/Training Manager \_\_\_\_\_

Grounds of Appeal:

**Appeals Committee ( to be completed by the centre):**

Date of Appeals Committee Meeting: \_\_\_\_\_

External Verifier: \_\_\_\_\_

Internal Verifier: \_\_\_\_\_

Assessor: \_\_\_\_\_

Independent Assessor: \_\_\_\_\_

Trainee (if appropriate ): \_\_\_\_\_

Outcome of the Appeals Committee: