

KOKUSAI TRAINING INSTITUTE

FOR OFFICE USE ONLY

# APPEAL FORM

## General Guidelines

### WHEN YOU MUST FILE YOUR APPEAL

- You must file the appeal form within **7 working days** from the date of release of assessment results.
- If you file by mail, Singapore Post Office postmark date will be used to determine if you have met the 7-day filing requirement.

### WHERE TO FILE YOUR APPEAL

- Kokusai Training Institute  
Appeals Processing Unit  
111 North Bridge Road  
#05-46 Peninsula Plaza  
Singapore 179098
- or**
- Online: [www.kokusai.com.sg](http://www.kokusai.com.sg) / Email: [training@kokusai.com.sg](mailto:training@kokusai.com.sg)
- or**
- Fax: +65 6339 9210

### HOW TO FILE YOUR APPEAL

Follow the instructions below and tick the applicable boxes. State your nature of appeal by writing legibly. We will acknowledge receipt of your appeal in writing, if you do not receive an acknowledgement within 20days, please contact the Appeals Processing Unit immediately at **6339 9007**. The officer-in-charge will be Mdm Wong

### WHAT YOU MUST FILE FOR YOUR APPEAL

- If in person, **completed** appeal form with acknowledgement by candidate / trainee / client.
- If by mail, email or fax:- download the appeal form available online at [www.kokusai.com.sg](http://www.kokusai.com.sg), **complete** the form with candidate / trainee / client name, NRIC number, course competency unit details, course date, assessment date and contact numbers stating the nature of appeal within 7 working days from the date of assessment results. .

### WHAT IS BEING APPEALED

- Assessment Results
- Structure of Course Fees
- Duration of Training
- Trainer / Training Institute
- Refund of Course Fees (Refer to Refund Policy)

### WHAT WILL BE REVIEWED

- Appeals Processing Unit will forward duly completed forms with attachments, if any, to internal Appeals Board for reviewing.
- Appeals Board will examine the nature of appeal and an official reply will be sent to the appellant in due course within **30 working days** stating the conclusion of the review, in writing.
- All correspondences will be recorded for future references.

### FILL IN THE INFORMATION BELOW

Trainee / Candidate Name: \_\_\_\_\_

NRIC No.: \_\_\_\_\_

Contact No(s) \_\_\_\_\_

Trainer / Assessor Name: \_\_\_\_\_

Course Competency Unit: \_\_\_\_\_

Course Date: \_\_\_\_\_

Assessment Date: \_\_\_\_\_

Date of Appeal:  
(Submission) \_\_\_\_\_

Signature: \_\_\_\_\_

