# Request for review of a selection decision

RMIT UNIVERSITY

## Section A – Personal details (Please use blue or black pen)

Title _____ Family name _____ Given names _____

Contact telephone number (home) _____ Contact telephone number (business) _____

Date of birth (DD/MM/YYYY) _____ Application/reference number _____

Email _____

Address _____

Suburb _____ Postcode _____

## Section B – Review information

To be eligible to seek a review of a selection decision you must answer 'yes' to all of the following:

1. Have you sought feedback on the outcome of your application from the selection officer within 10 working days from the date the formal notification was sent? ☐ Yes ☐ No
2. Did you satisfy all University and program entry requirements and complete any required selection tasks, e.g. interview? ☐ Yes ☐ No
3. Did you submit your application on time and in the correct manner, and include all relevant documentation at the time of selection? ☐ Yes ☐ No
4. Do you have evidence that the *Admission policy* or *Admission procedure* was improperly applied? ☐ Yes ☐ No
5. Will this application be lodged within 20 working days from the date on which formal notification was sent advising you of the outcome of your application? ☐ Yes ☐ No

If you have answered **NO** to any of the eligibility requirements listed above, you are **NOT eligible** to submit a request for a review of a selection decision. However, we will consider your feedback and provide you with further information regarding the outcome of your application where appropriate.

## Section C – Details of your application

Program name _____

RMIT program code or VTAC code _____

Application submitted ☐ Direct ☐ VTAC ☐ International ☐ Offshore partner institute

Please detail the reason for your application, where appropriate stating the way/s in which the University improperly applied the *Admission policy* or the *Admission procedure*. Where possible, please provide any supporting evidence that may assist in the assessment of your application. (If more space is required, you may use the back of this form or attach your statement as a separate page.)

## Declaration

I request that you review the selection decision for the program stated over page. I declare that the information I have given on this application form is accurate and that I have read and understood the information provided with this application.

Office use only

Signature

Date (DD/MM/YYYY)

Date stamp

## Submission

Submit this form via email to admissions.governance@rmit.edu.au or mail to:

RMIT Selection Reviews
Office of the Academic Registrar
GPO Box 2476
Melbourne VIC 3001
Australia