

loD

Appeal application form

Member number or contact reference number		
Candidate name (in full)		
Candidate email (this will be used by Examinations	s Team to contact you about your appeal):	
Examination or assessment (Please tick the exam/	's or assessment you wish to appeal)	
Certificate in Company Direction exam		
Strategy for Directors		
Leadership for Directors		
Finance for Non-Finance Directors		
Roles of the Director and the Board (UK or Inte	ernational)	
Diploma in Company Direction		
Chartered Director		
Date of examination or interview	Location (if applicable)	
Please select your ground/s for appeal below and p	provide information to support your appeal.	
Failure to notify requirement for special consi	derations	
Appeal grounds: An unexpected event occurred shall believes had an impact on their performance, and specified time frame.	nortly before or during the exam which the candidate they were unable to inform the IoD during the	
Please give further details below		



Error in Diploma marking		
Appeal grounds: A candidate believes there was an error in the marking of their Diploma examination.		
Please give further details below		
Error on the Certificate examination		
Appeal grounds: A candidate believes that there was an error in a question on the Certificate examination.		
Please give further details below		
Conclusions drawn from the Chartered Director interview		
Appeal grounds: A candidate believes the interviewers' decision was incorrect.		
Please give further details below		
Please give further details below		
Malpractice decision		
Appeal grounds: A candidate believes the decision made regarding a malpractice outcome		
was incorrect.		
Please give further details below		



Special considerations decision	
Appeal grounds: A candidate believes the decision madapplied was incorrect.	de regarding special considerations to be
Please give further details below	
I acknowledge that I have read the Results Review and provided is true and correct.	Appeals Process and the information I have
Signature	Date

Please return the completed form to examinations@iod.com. Once received, the IoD will acknowledge receipt and forward the invoice for the £150 fee within two business days. The application will not progress until payment has been received in full.

Please contact examinations@iod.com if you have any questions regarding this form, process or policy.