THE UNITED REPUBLIC OF TANZANIA
MINISTRY OF EDUCATION, SCIENCE AND TECHNOLOGY
THE UNIVERSITY OF DODOMA

STUDENT APPEAL AGAINST SENATE DECISION

Important Considerations

1. The completed appeal form and documentary evidence (if any) will only be accepted if submitted within one (1) year from the date of publication of the results by or under the authority of the Senate.
2. All appeals should start at the Department level.
3. Pay in slip of a non-refundable appeal fee and all relevant documents must be attached to this form.
4. Late appeal applications cannot be accepted.

PART A: CANDIDATE'S PERSONAL DETAILS

Name of Candidate: .....
Registration Number: .....
Department: .....
Programme: .....
College/Institute/School: .....
Contact Address: .....
Telephone Number:.....

Ground of the appeal

a. Unfair marking/grading
b. Others (please specify): .....

Statement of appeal:

Provide a written submission stating your case, be specific indicate course code and name if applicable, and attach any supporting document

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Signature..... Date.....

RECOMMENDATION BY THE DEPARTMENT APPEAL COMMITTEE

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Name: ..... Signature:..... Date .....

RECOMMENDATION BY COLLEGE/INSTITUTE/SCHOOL APPEAL COMMITTEE

Recommended ☐ Not Recommended ☐

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Name: ..... Signature:..... Date .....

RECOMMENDATION BY DIRECTOR, POSTGRADUATE STUDIES

Recommended ☐ Not Recommended ☐

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Name: ..... Signature:..... Date .....

RECOMMENDATION BY CHAIRPERSON OF SENATE POSTGRADUATE STUDIES COMMITTEE

Recommended ☐ Not Recommended ☐

Comments: .....

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Signature..... Date.....

APPROVAL BY CHAIRPERSON OF THE UNIVERSITY SENATE

Approved ☐ Not approved ☐

Comments: .....

Signature..... Date.....

Note

i. You are required to pay total amount of 15,000/= per appeal ii. Original pay in slip should be submitted together with this form