

**VERIFICATION / REVIEW REQUEST**

**\*\*Submit Form within 7 working days of release of results on Student Intranet / Notice Boards \*\***

**The college regulations relating to Verifications / Reviews must be read and understood before submitting this form**

**Student No:** \_\_\_\_\_ **Course:** \_\_\_\_\_

**Student Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Indicate:**      **Verification:**       **Review:**

**Request for Review must be accompanied with a letter outlining grounds for Review**

<b>Subjects:</b>	<b>Module Code</b>	<b>Module Title</b>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

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**Please Complete, Print and Submit in hard copy only**

**Payment (Cheque/Draft) of €50 attached:**

**Payment (Cheque/Draft) of €130 attached:**

**Paid in cash at reception. Receipt No.:** \_\_\_\_\_

**Paid in VISA by phone/in person. Receipt No.:** \_\_\_\_\_

You will receive a response within 10 working days.