

Irish Water Safety

Appeals Procedure

The following appeals procedure applies in the case of all national courses run by Irish Water Safety.

Any candidate who is, in any way, dissatisfied with the assessment result, should invoke the following appeals procedure:

1. The candidate should make his/her initial appeal to the Course Director.
2. If the candidate is not satisfied with the explanation and does not feel that it has been properly negotiated the appeals procedure may be invoked.
3. The candidate should complete part A of the Assessment Appeal Form (attached). The form should then be given to the Course Director who will complete the appropriate sections and return it to IWS. A fee of €50, payable by the candidate, applies (refundable where the appeal is successful)
4. A second Examiner appointed by the Technical committee of the day, will be asked to correspond with the candidate and the first line Examiner independently in order to ascertain the problem. Once this has been done, the appropriate sections on the appeal form will be completed stating the decision made.
5. The candidate will indicate acceptance or non-acceptance of this decision. In the case of non-acceptance he/she will have the right to ask an Examiner appointed by Council to adjudicate.
6. This Examiner will complete the appropriate sections on the appeal form to record the procedure he/she used to determine the basis on which the second Examiner's decision was made.
7. Once in possession of the relevant facts the Examiner appointed by Council will make a decision and record this together with the reasons on the appropriate sections of the form.
8. At this stage the Examiner appointed by Council will meet with all concerned and present a decision. If the candidate still wishes to take the matter further then he/she will be required to present the appeal to the Council of IWS, who will convene a special panel to hear the case. Clear evidence on any *final assessment decision* will be given.

Confidentiality

Details of the case will be discussed only by those involved at any given stage. Advice may be sought from others by those involved but the anonymity of the candidate must be maintained.

Any paper work relating to such cases will be kept securely at the HQ of IWS. The members of IWS will not keep personal copies involved.

Assessment Appeals Form

Complete Part A and send to IWS HQ

Part A (To be completed by the candidate)

Name: _____

Address _____

Phone number: _____

Email address _____

Course Type _____

Course Location _____

Course Date _____

Course Director _____

First Line Examiner _____

I am dissatisfied with the assessment carried out on the above course. I have discussed this with my Course Director and I am not satisfied with the outcome. I set out below the brief details of my complaint and I confirm that I wish to invoke the appeals procedure. I enclose €50, which I understand is refundable should my appeal be successful.

Signature (candidate) _____ Date: _____

I have discussed the above with the candidate.

Signature (Course Director) _____ Date _____

*Head Office only to complete the following
Appeals Form Reference Number: _____*

:

Part B (to be completed by the second examiner appointed by the Technical committee)

I have corresponded with the candidate whose complaint is outlined in Part A of Appeals Form Reference Number _____, and with the first line examiner detailed therein. I set out below my comments, which I have discussed with both the candidate and the examiner.

I consider that the appeal should be upheld.

I consider that the appeal should fail and the original assessment upheld.

(Delete as appropriate)

Signature: (examiner) _____ Date: _____

I am satisfied with the outcome of the appeal

I am not satisfied with the outcome of the appeal and I wish to take this appeal to the next stage

(Delete as appropriate)

Signature (candidate): _____ Date: _____

Part C (To be completed by the examiner appointed by Council)

I have reviewed the procedure adopted by the second examiner in Appeal Number _____ and I set out my comments below:

I have met with the candidate and with both examiners.

I consider that the appeal should be upheld.

I consider that the appeal should fail and the original assessment upheld
(Delete as appropriate)

Signature: _____ Date:

I am satisfied with the outcome of the appeal.

I am not satisfied with the outcome of the outcome and I wish to take this appeal to the next and final stage.

Signature (candidate) _____ Date: _____

Part D (Appeals Panel)

Appeal Form Part A received by IWS on _____

Appeal Panel Formed on _____

Members of the Appeal Panel:

1. _____ (Chairman)

2. _____

3. _____

I confirm that the Appeal Panel met on _____ to the consider Appeal
Number _____

The decision of the Appeal Panel is:

That the appeal should be upheld.

That the appeal should fail and the original assessment upheld

(Delete as appropriate)

Signature (Chairman of the Appeal
Panel) _____

Date: _____

Head Office only

Candidate notified of the result on _____

Candidate reimbursed €50 on _____

(Applies only where appeal has been successful.)
