Water Safety Ireland

Appeals Procedure



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

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 WSI. 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 WSI, 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 WSI. The members of WSI will not keep personal copies involved.



Assessment Appeals Form

Complete Part A and send to WSI HQ

Part A (To be completed by the cand	idate)
Name:	
Address	
Phone number:	
Email address:	
Course Type:	
Course Location:	
Course Date:	
Course Director:	
First Line Examiner:	
I am dissatisfied with the assessment of discussed this with my Course Director outcome. I set out below the brief detail wish to invoke the appeals procedure, refundable should my appeal be successive.	and I am not satisfied with the ils of my complaint and I confirm that I enclose €50, which I understand is
Signature (candidate)	Date:
I agree to the management of my personal data in accordance	
I have discussed the above with the ca Signature (Course Director)	
Head Office only to complete the follow Appeals Form Reference Number:	



 $\mbox{\bf Part B}$ (to be completed by the second examiner appointed by the Technical committee)

A of Appeals Form Reference Numb	date whose complaint is outlined in Part per, and with the first out below my comments, which I have and the examiner.
I consider that the appeal should be I consider that the appeal should fa (<i>Delete as appropriate</i>)	e upheld. il and the original assessment upheld.
Signature: (examiner)	Date:
· · · · · · · · · · · · · · · · · · ·	
I am satisfied with the outcome of t	the appeal
I am not satisfied with the outcome appeal to the next stage (Delete as appropriate)	of the appeal and I wish to take this
Signature (candidate):	Date:



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

I have reviewed the procedure adopted Number and I set out my contact the procedure adopted in the procedure adopted	
I have met with the candidate and with	th both examiners.
I consider that the appeal should be u I consider that the appeal should fail a (Delete as appropriate)	•
Signature:	Date:
I am satisfied with the outcome of the I am not satisfied with the outcome o appeal to the next and final stage.	
Signature (candidate)	Date:



Part D (Appeals Panel)

Appeal Form Part A received by WSI onAppeal Panel Formed on		
Members of the Appeal Panel:		
1	(Chairman) - -	
I confirm that the Appeal Panel met on Appeal Number	to the consider	
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		