

REQUEST FOR RECONSIDERATION (APPEAL) FORM

Candidates who wish to appeal an unfavorable non-disciplinary decision taken by DASCA can use this form to request for reconsideration.

An Appeal may only be submitted on one of the following grounds:

- Concerns about an unsuccessful exam result
- Medical or personal emergency in the family
- Immobility issues due to economic restrictions or disruptions
- If obliged to report for an urgent national duty, serve on juries, or are called to court

Review:

The request will be reviewed by DASCA within 10 business days of receipt of the appeal. Please review the DASCA examination policies prior to submitting the request.

Registrant ID*: Name*: Email ID*: Contact Number:		
Name*: Email ID*:		
Email ID*:		
Contact Number:		
REASON FOR THE APPEAL:		
	at the information provided by me is true and correct. I hereby, authorize he information provided. I understand that this will be treated as	
confidential infor		
Signature:	Date:	

INSTRUCTIONS TO SUBMIT FORM:

- 1. This form can be edited digitally.
- 2. Download this form and fill the required fields.
- 3. Attach the required documents along with this form and submit here.