IB Office

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**Telephone**: 01865 319470

**Email**: fieldinga@stedwardsoxford.org

**ENQUIRIES ABOUT EXAMINATION RESULTS**

If, on receiving your results, you wish to pursue a results enquiry you need to complete the attached form. Before proceeding, though, this should be discussed, and agreed, with the relevant Head of Department. Unless the total of marks shows that the next grade up was only narrowly missed, it **may not** be advisable to proceed. It is very important to remember that **a subject grade may be raised, confirmed or lowered** after an enquiry and it is **your, and only your, decision to make**.

Category 1 re-mark: this will lead to the re-mark of **all** externally assessed material (this does not include multiple-choice exam papers).

A request for a remark costs **£72** however this fee will be refunded if the request leads to the grade being increased.

To initiate any enquiry, please complete this form overleaf and return it to the IB Office at St Edward's School by post or email (fieldinga@stedwardsoxford.org). Then, please call 01865 319 470 and pay directly through Miss Fielding in the IB Office. Please **do not** send Credit Card details by post or email. An enquiry cannot proceed until payment has been made. The form must be signed by you.

**The last date for a request for remark is 11 September 2020.**

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| **ENQUIRIES ABOUT EXAM RESULTS: IB** |
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| **Candidate details** |
| Surname |   | Cand. No |   |
| First name |   | D.o.B. | \_\_\_/\_\_\_/\_\_\_ |
| Address & postcode |
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| Telephone 1 |   |
| Telephone 2 |   |
| Email |   |
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| **Exam details** |
| **Subject** | **Level** | **Proximity to grade boundary** |
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| I give my consent to St Edward's School to submit a review of marking for the examination(s) listed above. In giving consent I understand that the final subject grade and/or mark awarded to me following a review of marking, and any subsequent appeal, may be lower than, higher than, or the same as the result which was originally awarded for this subject. Signed: ………………………………………………………………………. Date:………………….. |
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| Candidate's signature:  | Date |