

Notice of Appeal Under S.I. No. 503 of 2014 Qualifications and Quality Assurance (Education and Training) Act 2012 (Appeals) Regulations 2014

This Notice of Appeal must be used by providers (or person acting for a provider) to appeal a decision of Quality and Qualifications Ireland (QQI) made in accordance with the provisions of the Qualifications and Quality Assurance (Education and Training) Act 2012.

The following actions of the Authority are subject to appeal under the Act:

- **Section 31(5):** Refusal to approve proposed quality assurance procedures
- **Section 36(6):** Withdrawal of approval of quality assurance procedures
- **Section 45(4):** Refusal to validate a programme of education and training
- **Section 47(5):** Withdrawal of validation of a programme of education and training
- **Section 53(11):** Refusal of a request for delegation of authority to make an award
- **Section 53(12):** Specification of a condition for the purpose of delegation of authority to make an award.
- **Section 55(7):** Withdrawal or variation of authority to make an award
- **Section 59(6):** Withdrawal of approval of procedures for access, transfer and progression
- **Section 61(12):** Refusal to authorise the use by a provider of the international education mark
- **Section 63(9):** Withdrawal of provider authorisation to use the international education mark

A Notice of Appeal must be submitted **within 30 days** of the date of notification of QQI's decision to the Provider. QQI should obtain proof of delivery of its decisions.

The 30 day period may be extended, in exceptional circumstances, at the discretion of the Chairperson of the Appeals Panel.

An appeal fee is applicable. This fee, which is payable electronically, may vary from time to time.

Consideration of a Notice of Appeal will commence following receipt of the fee.

The Secretariat Appeals

Faoi Cailiochtaí agus Dearbhú Cáilíochta (Oideachas agus Oiliúint) Gníomhu 2012
Under Qualifications and Quality Assurance (Education and Training) Act 2012

26/27 Denzille Lane, Dublin 2, Ireland.

Telephone +353 (0) 1 905 8100

The fee is payable electronically to:

Quality and Qualifications Ireland

Bank Name: Allied Irish Bank

Bank Address: 1-4 Lower Baggot Street, Dublin 2

Account Name: The Qualifications and Quality Assurance Authority of Ireland

Address: 26-27 Denzille Lane, Dublin 2

Account No.: 31667035

Sort Code No.: 931012

IBAN No.: IE11 AIBK 93101231 667035

BIC No.: AIBKIE2D

The full fee is refundable if the related appeal is upheld. There is no refund in the event of an appeal being rejected or withdrawn.

Appeals must be made in writing using the Notice of Appeal form via email to [QQI Appeals – click here](#) or by post addressed to:

The Chairperson
c/o The Secretariat
QQI Appeals Panel
26-27 Denzille Lane
Dublin 2
D02 P266.

We recommend you clearly write 'Notice of Appeal' on the envelope and obtain proof of postage. On receipt by QQI, this will be date stamped. The secretariat will date stamp and acknowledge each written appeal received by hardcopy or by email.

An appeal may be withdrawn by the provider concerned at any time by notice in writing to the Chairperson of the Appeals Panel.

Documentation to accompany the Notice of Appeal should include:

- QQI's decision
- Grounds of refusal provided to the provider by QQI
- Supporting documentation relevant to the matter being appealed.

Documentation submitted with the Notice of Appeal should, in all cases, be relevant to the decision being appealed.

Providers should not provide any documents that they wish to retain for the future. Documents submitted will not be returned.

This Notice of Appeal must be completed in full and signed by the provider (or person acting on behalf of the Provider).

Section A – Personal Details

Name of provider:	
Address:	
Contact name (provider):	
Head of provider institute:	<i>(If different from above)</i>
Contact phone number (provider):	
Contact email address (provider):	
Name of Person acting on behalf of the provider (if any):	
Address:	
Contact address (Person acting):	
Contact phone number (Person acting):	
Contact email address (Person acting):	

Section B

In this section, please state, in full, the grounds of appeal and the facts and contentions upon which you intend to rely.

Signed: _____

Date: _____