## Application for an Enquiry: Qualification Approval Risk Status

Email address



This is to be submitted to City & Guilds **within 20 working days** of the date on which you were notified of the decision.

Centre name		
Centre number		
Centre Activity Report Transaction number		
Date of the Quality Assurance Activity (eg date of visit)		
Date on which you were notified of the decision by City & Guilds		
Qualifications involved Please only include qualif	a fications where you disag	ree with the status given
• If the appeal finds the refunded.	uiries and Appeals – the p	t of this application. procedures or policy were not followed, the fee will be process and how to apply for current fees.
Name		
Position		
Date		
Telephone number		

## Your explanation must include: clear statements identifying the specific reasons for the Enquiry a clear and full account of your reasons for disagreeing with the decision(s) made

**Reasons for the Enquiry**