

(NBAA)
THE NATIONAL BOARD OF ACCOUNTANTS AND AUDITORS TANZANIA

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APPEAL FORM

CANDIDATE'S NAME		INDEX/REG. NUMBER	
*NAME OF SUBJECT(S)		SUBJECT CODE (S)	
*EXAM SESSION		*EXAM CENTER	
MODE OF PAYMENT		RECEIPT/CHEQUE NO.	
TYPE OF APPEAL			

*Fill if appropriate

Instructions:-

- Submit the form to the Executive Director with the following information: candidate name, candidate index number, name of subject(s), subject code(s), exam session, exam center, mode of payment and receipt/cheque number depending on the type of appeal.
- All appeals against the examination results shall be made in writing to the Board within seven working days from the release of results
- Such appeal shall accompanied by an administrative fee Tshs. 100,000.00 per paper
- No appeal will be accepted for re-grading of a paper in which the candidate has passed
- Candidates will have no access to their answer scripts
- Only one appeal per examination is allowed. No re-appeals are permitted

Provide reasons for appeal in the space provided below:

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(You may add a separate sheet if the space provided is not sufficient)

I certify that the above written information is correct regarding my application for appeal.

Candidate's Signature: _____

NB: An application submitted for appeal after the prescribed time shall not be attended.

FOR OFFICIAL USE ONLY

Received by:
 NBAA official:
 Received on:
 Signature:
 Date:
