

## APPEAL FORM

### Section 1: Appellant Information

Full Name \_\_\_\_\_

Certification Program \_\_\_\_\_

Certification ID (if applicable) \_\_\_\_\_

Contact Number \_\_\_\_\_

Email Address \_\_\_\_\_

Mailing Address \_\_\_\_\_

### Section 2: Appeal Details

Date of Notification of Decision Being Appealed \_\_\_\_\_

Nature of Decision Being Appealed ☐ Exam Result ☐ Eligibility Decision ☐ Certification Revocation ☐ Other (Specify): \_\_\_\_\_

Summary of Appeal (please describe the issue in detail) \_\_\_\_\_

Supporting Documents Attached? ☐ Yes ☐ No

### Section 3: Declaration

Appellant Signature \_\_\_\_\_

Date \_\_\_\_\_

#### Note:

- Appeals must be submitted **within 10 business days** of the decision notification.
- Email the appeal form and supporting documents to: [certification@gsmrgulf.org](mailto:certification@gsmrgulf.org)