

Organiser:



Co-organiser:

APPEAL APPLICATION FORM



Programme Name / Specialty:	BEAM Professionals Training and Examination				Date of Submission: (DD/MM/YY)
	☐ New Buildings (NB) ☐ Existing Buildings (EB) ☐ Interiors (BI) ☐ Neighbourhood (ND)		☐ New Data Centres (NDC) ☐ Existing Data Centres (EDC) ☐ Existing Schools (ES)		
	☐ BEAM Affiliate Training and Examination				
Name : (Name shown on your HKID / Passport)			Dr / Ir / Prof / Mr / Mrs / Ms		
Phone No:		Email Address:			
Organisation :			Job Title :		
Examination Session Taken:		Date:		Time:	
Seat No.:					
Form(s) of Appeal: (choose more than 1 box if applicable)			☐ Appeal to Process and Procedure		☐ Appeal to Questions

Reasons for Appeal:

(Please elaborate in more details with evidence if possible. You can also attach relevant documents as additional information.)

PAYMENT

Fee: HK\$500.00 (Administration Fee) + _____ (Process(es) / Procedure(s) / Question(s) to be appealed) x HK\$500.00

Total Amount: HK\$ _____

Please send a crossed cheque made payable to "BEAM Society Limited" together with the completed Appeal Form to:
Rm 105 – 108, 1/F, Jockey Club Environmental Building, 77 Tat Chee Avenue, Kowloon Tong, Hong Kong

Cheque Number and Issued Bank: _____

Notes to Applicants:

1. Appeal should be applied within 10 calendar days upon receipt of the provisional examination result.
2. Application must be submitted together with cheque payment. An official receipt will be issued shortly upon cheque clearance.
3. An acknowledgement email will be issued to the Appeal Applicant within 5 calendar days from the day the form and cheque are received.
4. BSL will review the case and issue a reply to the Appeal applicant within 1 calendar month.

DECLARATION & CONFIDENTIALITY

I hereby declare that I have read the "Notes to Applicants" stated in the above; and this submission will be kept confidential.

_____ Signature of Applicant		_____ Date	
All information supplied will be used strictly confidential.			
For Office Use Only Case Received Date: Case Assigned To: Deadline to Reply to Applicants		Case No: Case Received by: Case Copied To: Closing Date:	
		Closed By:	