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| --- | --- |
| ARC stacked black and white logo | Notification of  Assessment for Consideration |

# Assessment Review Request – return this completed form to [ARC-NCGP@arc.gov.au](mailto:ARC-NCGP@arc.gov.au)

Important Information:

* This form must be received by the ARC within 3 working days from the opening   
  of the Rejoinder period for all NCGP schemes
* The ARC will only accept completed forms that are submitted by the Administering Organisation.
* Removal of an assessment may only occur for assessments that meet the strict review criteria as detailed on this Request form.
* The Administering Organisation will be informed of the outcome of this review.
* Refer to the [ARC Rejoinder webpage](https://www.arc.gov.au/grants/grant-application/rejoinders) for further information on the Review process.

## Application Information

| Administering Organisation |  |
| --- | --- |
| Application ID |  |
| Application Title |  |
| Lead Investigator |  |

## Review Criteria

You must select one or more of the following criteria that apply to the identified assessment:

Defamatory comment/s

☐ Evidence of assessor conflict

☐ Discriminatory/biased comments

☐ Brief assessment text (less than 100 words)

☐ Scores included within the assessment text

☐ Assessment text does not match with correct application

☐ Comments in the assessment regarding application eligibility

☐ Comments in the assessment regarding the National Interest Test statement

☐ Other

## Justification

This request will not be considered without adequate justification and certification from the Administering Organisation’s Research Office Manager level or equivalent.

| Assessor ID  Please indicate Assessor A, B, C etc. |  |
| --- | --- |
| Justification Please provide comments to support this request and why the assessment text is considered inappropriate (Use examples from the assessment text to illustrate the issue). |  |

## Administering Organisation

*The Administering Organisation certifies that the information provided is accurate and factual.*

| Administering Organisation Staff Name |  |
| --- | --- |
| Staff Position Title |  |
| Date |  |