

Examination Appeal Form for Candidates

Note :

1. After the release of examinations results, candidates may request the Assessment Management Unit for a re-marking of their answer scripts.
2. Candidates who receive a fail grade have the option of applying for a re-marking of their answer scripts for a fee of **RM100 / USD50 per subject**. This fee is non-refundable.
3. The re-marking of the answer script does **NOT** guarantee any change in the result.
4. Appeals for re-marking must be made within 2 weeks from the announcement of the examination result.
5. Any decision made after the re-marking is final. No further appeal will be entertained by the Assessment Management Unit.
6. The re-marking result will be ready within 1 month from the remarking/appeal closing date.
7. Please return the completed form together with bank-in slip (if any) by email to agentexam@mii.org.my for our further action.

| PERSONAL DETAILS | |
|---|-------------------|
| Name: | NRIC : |
| CEN No.: | Telephone Number: |
| Address : | |
| DETAILS OF THE EXAMINATION APPEAL | |
| Examination Subject: | |
| Date of Examination : | |
| Result of Examination : | |
| Reason why you believe there is need for appeal/ re-marking | |
| PAYMENT | |
| Tick (✓) method of payment, and if applicable | |
| <input type="checkbox"/> Online Banking – RHB Account : 2-64160-00004670 (Local Currency) 6-14165-00000321 (Foreign Currency) | |
| <input type="checkbox"/> Credit card : Please debit my account with the total cost of the services ordered on this form according to MII prices at the time of processing Type of card (please tick ✓) <input type="checkbox"/> Visa <input type="checkbox"/> Mastercard <input type="checkbox"/> Amex Valid from : □□ / □□ (mm-yy) Expiry date: □□ / □□ (mm-yy) CVV No _____ Card Number : _____ Card holder name and address if different from personal details _____ _____ Postcode : _____ | |
| Card holder signature: | Date: |