

# The Australian Institute of Quantity Surveyors

(ABN 97 008 485 809)

## SKILLED MIGRATION ASSESSMENT APPEAL REQUEST APPLICATION FORM 2015

### APPLICATION GUIDELINES AND PROCESS

The Australian Institute of Quantity Surveyors (AIQS) is specified by the Minister for Immigration and Border Protection as the relevant assessing authority for the occupation of Quantity Surveying ANZSCO 233213 **only**. Quantity Surveying is deemed to include: cost management, cost control, construction management, construction economics and cost engineering.

The AIQS provides an appeal mechanism for consideration of any applicants who object to the findings of their skilled migration assessment. Appeals must be submitted in writing within three (3) calendar months of the date of the initial assessment. Applicants making an appeal must complete the *Appeal Request Application Form* with the details of the appeal and pay an Appeal. This is to be paid at the time of submitting the appeal and is non-refundable. Any additional costs incurred by the applicant as a result of the appeal process are the responsibility of the applicant.

The appeal will be reviewed by an Appeal Panel consisting of two Skilled Migration Assessors who have been appointed by the Institute, but will not include the Assessor who made the initial decision which is being appealed. Assessors are all senior members of the Institute who have a wealth of experience working in the Quantity Surveying profession in Australia.

The Institute will endeavor to make a decision on all appeals received within 45 days of receipt of the *Appeal Request Application Form*. Once your *Appeal Request Application Form* has been reviewed by the Appeal Panel, you will receive a letter sent by email advising you of the outcome. You will be notified in writing of the outcome of your appeal, if positive you will be re-issued with a replacement skilled migration assessment letter.

### APPEAL FEE

Fees are applicable from 1 January 2014.

<i>Assessment Specification</i>	<i>Applicants Living In Australia</i>	<i>Applicants Living Overseas</i>
Appeal Fee	AUD\$440.00 (incl GST)	AUD\$400.00 (GST free)

Payment of the Assessment Fee is **payable in Australian Dollars** and must accompany this application. Payment can be made either via Bank draft (made payable to the Australian Institute of Quantity Surveyors) or Credit Card details are required.

Send *Appeal Request Application Form* with payment and all required certified documents (electronic copy accepted in PDF format) to:

**BY MAIL:** **Skilled Migration Assessment Officer**  
**The Australian Institute of Quantity Surveyors**  
**Suite 303, Level 3, 70 Pitt Street, Sydney NSW 2000, Australia**

**BY EMAIL:** [skilledmigration@aiqs.com.au](mailto:skilledmigration@aiqs.com.au)

**PAYMENT DETAILS**

Bank draft is enclosed **OR** my credit card details are provided below for the amount of (please tick):

	<b>Applicants Living in Australia</b>	<b>Applicants Living Overseas</b>
Appeal Fee	<input type="checkbox"/> AUD\$440.00 (incl GST)	<input type="checkbox"/> AUD\$400.00 (GST free)

MASTERCARD   
  VISACARD   
  AMERICAN EXPRESS   
  DINERS CLUB  
 ..... / ..... / ..... / .....    Expiry Date: ..... / .....

**NAME OF CARDHOLDER** (please print): .....

**SIGNATURE OF CARD HOLDER:** .....

**APPLICANT DETAILS** (please print clearly)

Title:     Mr     Ms     Miss     Mrs     Other: .....

Given Names (first name): .....

Family Name (surname): .....

Date of Birth (day/month/year): ..... / ..... / .....    Age (years): .....

Email (required): .....

Address: .....

Suburb: .....    State: .....    Postcode: .....

Country: .....    Preferred Phone Contact: .....

**APPEAL REQUEST**

I hereby lodge an appeal against the assessment of the Australian Institute of Quantity Surveyors that my academic qualifications and skilled employment experience do not meet the requirements for the occupation of Quantity Surveying ANZXCO 233213 for migration purposes.

Signature: .....    Date: ..... / ..... / .....

**MIGRATION ASSESSMENT REFERENCE NUMBER**

(located on your skilled migration assessment letter from AIQS) .....

<b>OFFICE USE ONLY</b>	
AIQS ID: .....	Payment Received: ..... / ..... / .....
Migration Assessment No: .....	Invoice No: .....
Date Received: ..... / ..... / .....	Date Sent to Appeal Panel: ..... / ..... / .....

**MIGRATION AGENT DETAILS** (if applicable)

Company Name: .....

Given Names: .....

Family Names: .....

Address for Correspondence: .....

Suburb: ..... State: .....

Postcode: ..... Country: .....

Email (required): .....

Preferred Phone Contact: .....

I give consent to my Migration Agent (details above) to act on my behalf in all dealings with the AIQS

Signature: ..... Date: ...../...../.....

**REASON FOR APPEAL**

Please outline your reason for appeal on this page. If the space provided below is insufficient, please attach a separate page.

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**DECLARATION**

I declare that the information I have supplied in this application, and the documents attached are true and correct. I understand that any information supplied that is inaccurate or misleading may lead the AIQS to refer the issue to the relevant authorities. I consent to the use, collection, and disclosure of the personal information supplied in this application in accordance with the AIQS Privacy Statement.

Signature: ..... Date: ..... / ..... / .....