## Certification Reconsideration Appeal

## Section 1: General Information

Given Name / First Name

Family Name / Surname

ICOSE Member

Middle Initial

Email Address

INCOSE Member Number

## Section 2: Reason for Appeal

I was recently denied certification at the following level: CSEP ESEP

Please reconsider my candidacy based on the following reason(s), described in detail below:

INCOSE did not follow the documented process.

Members of the INCOSE review team should have recused themselves.

My degree should have been qualified as a technical degree.

Extenuating circumstances prevented me from being fairly evaluated.

I understand I am not permitted to submit a revised application or references as part of my appeal. The following details expand upon the appeal reasons identified above:

Applicant's Signature (typed name serves as signature)

Form 11 - Certification Appeal

Date (YYYY-MM-DD)

