

## **Student Appeals Form**

Students who wish to appeal a decision made by the College must complete this Student Appeals Form within the time frame stated in the "Appeals & Grievances" policy listed in the College Catalog. Students must describe, in details, the college policy or grade in which they are requesting consideration or exemption for appeal and provide any supporting documentation. A written response will be given to the student within ten (10) calendar days from the date of submission. Please refer to the College Catalog for additional information on the appeals process.

Student Name (print):		Student ID #:	Program:		
E-mail Address:	Campus	Campus / Location:			
Telephone:	Program Start Date / Cohort:			Date of Appeals:	
REASON FOR APPEAL:					
Policy/Catalog Exemption Attendance/Terminat	nation 🛛 Grades		□ Other:		
For grading and attendance related issues, student must first contact their instructor. Please include any documentation of instructor contact regarding this issue with this appeal form.					
LEVEL OF APPEAL:					
		IS Appeal Hearing*		– Final Appeal*	
* For Level 3 Appeals – The Campus Grievance and Appeal Committee Hearing form will need to be completed by the campus and attached, * For Level 4 Appeals - All decisions made by the National Academic Dean are final, and a Level 4 appeal is the last step in the appeals process provided by the College.					
Please provide a brief description of the reason for appea	al and v	vhy you wish to app	eal:		
Please explain the changes in your circumstance(s) that	will allo	w you to succeed in	n your program	:	
Please describe the desired outcome of your appeal:					
Student Appeals Form					

n be attached to this form if needed:		
ident Signature:		Date:
*Once completed and signed, please submit this appeals request and a	ny supporting documentation to you	r Program Director/Academic Dean.*
CAMPUS	USE ONLY:	
CATIL 05	Notification sent to student on/by:	

Program Director / Campus Dean Signature:	Date:
Regional Dean / National Dean Signature:	Date:
Chief Academic Officer/National Dean of Allied Health Signature:	Date:
Academic Comments:	
Student Annuals France	2