

Student Name

## **Vancouver Campus**

#100-602 W Hastings St, Vancouver British Columbia, V6B 1P2, Canada Tel. (604) 681 5815 Fax. (604) 681 5819

## **Burnaby Campus**

**Date Student Notified** 

#101-4603 Kingsway, Burnaby British Columbia, V5H 4M4, Canada Tel. (604) 435 5815 Fax. (604) 435 5895

## ADMISSIONS AND REGISTRATION APPEAL

Student ID

The purpose of this form is to provide students with the opportunity to submit a formal appeal to the Registrar for policy exemption and other special requests related to Admissions, Student Records (including documentation, student information, academic standing, etc.), Registration, Transfer Credit and Graduation, or Financial Aid.

Address		City		
Telephone #		Email		
<u>Instructions</u> :				
✓	✓ Briefly identify the purpose for your appeal, and explain why you should be granted an exemption from the established policy. Please use the back of this form if more writing space is needed.			
✓	Attach supporting evidence, if applicable.			
✓	Submit this form and supporting evidence to the Office of the Registrar.			
✓	You will be notified of the outcome by email within 3-5 business days.			
What is the purpose of your appeal?				
Why should it be approved?				
Studer	nt Signature		Date	
OFFICE USE ONLY (Please do not write in this area)				
Decision:				
Comments				
Comments:				
Name (	please print) Signature		Date Signed	