

ACADEMIC APPEAL FORM

The purpose of this form is for students to report and/or submit a formal appeal to the College regarding an Academic Alert.

Student Name	Student ID
Address	City
Phone Number	Email

- Identify the assignment/exam name and reason for alert.
- Attach supporting evidence (see the relevant Office of Student Affairs page for examples).
- Submit this form and supporting evidence to the Office of Student Affairs by email studentaffairs@alexandercollege.ca

We evaluate your appeal on the basis of the argument and evidence provided here ONLY. No further information will be accepted after a decision has been made.

Course Name (and section)	Course Instructor	Assignment/Exam

What is your reason for appeal?

I understand that a final decision will be made based on the information and supporting evidence that I provide with this form. I understand that I cannot come back later with more information or a different reason for appeal.

Student Signature

Date

OFFICE USE ONLY (Please do not write in this area)

Decision & Comments:

Name

Signature

Date Signed

Date Student Notified