Policy 8026: Appeal Form

This form should be submitted electronically to vpaa@sherman.edu or in hard copy to the Office of Academic Affairs in Scallon Hall D no later than 8:00am on the first Wednesday of the quarter.

Name: _____ Date: _____

Mailing address: _____

Policy 8026 states that an appeal is a request for an exception to college policy or is submitted to dispute a decision made by a faculty member, college committee or administrator regarding the *implementation of policy*. Therefore, all academic appeals must *directly relate* to an academic policy.

Appeal Reason and Policy:
☐ Academic Dismissal (Policy 1051 – Academic Standing) ☐ Other (Policy Number and Name: _____)

Criteria I – Evidence of Extenuating Circumstances *What facts or details are important for the committee to fully understand your situation? Please attach any supporting documentation if applicable.*

Criteria II – Status of Extenuating Circumstances
How have the circumstances of your situation been addressed?

Criteria III – Plan of Action
If your appeal is approved, explain how you will demonstrate and ensure your success in the program?

_____ _____

Signature Date

Typing your name above constitutes an electronic signature.