

Academic Appeal Request Form

Please complete this form and return it, together with a receipt for the appeal fee, and any additional information or documentation to the Academic Chair or Dean for your program. The appeal fee is \$25 and can be paid at the Cash office on your campus after you have obtained your Chair's signature. You may obtain assistance regarding the academic appeal from the Student Services Department on your campus.

Please note that according to Appendix C of Seneca College's Academic Policy, the appeal request must be submitted within one month after final grades are made available.

Last Name _____ First Name _____

Address _____

City / Town _____ Province _____ Postal Code _____

Telephone (Home) _____ (Cellular) _____ (Business) _____

Student # _____ Program _____

Email address _____

DETAILS OF THE REQUEST FOR ACADEMIC APPEAL

You must obtain the signature of the Chair or designate **BEFORE YOU PAY** the \$25 appeal fee.

Name _____ Signature _____ Date _____

Subject Name and Grade being appealed:

Transcript comment or other academic decision being appealed:

Semester transcript comment/grade/academic decision occurred, e.g. Fall 2012:

- State what outcome (e.g. grade change, removal of a transcript comment) you are seeking:

continued on next page

- Describe in detail what attempts have been made to resolve this issue informally. Attach an additional sheet if necessary.

- State in detail your reason(s) for the appeal. Attach an additional sheet if necessary.

- Attach any documentation that is relevant to your appeal.
- Attach the receipt for the \$25 appeal fee.

Please note that the appeal will be treated confidentially; however, it may be necessary to contact other individuals in order to follow up with this appeal. If you wish, you may have one person attend the appeal hearing with you as an observer only. Here is the website to review Academic Policy regarding Academic Appeals: senecacollege.ca/academic-policy

Signature of Student

Today's Date

FREEDOM OF INFORMATION AND PROTECTION OF PRIVACY ACT

Personal information on this form is collected in accordance with sections 21, 39 and 49 of the Freedom of Information and Protection of Privacy Act and under the legal authority of the Ministry of Training, Colleges and Universities Act, R.S.O. 1990, and the Ontario Colleges of Applied Arts and Technology Act, 2002, Regulation 34/03, and may be used and/or disclosed for administrative, statistical and/or research purposes of the College and/or the ministries or agencies of the Government of Ontario and the Government of Canada. If you have any questions concerning the collection and use of personal information, please contact the Privacy Office at (416) 491-5050 extension 77846 or email privacyoffice@senecacollege.ca. The mailing address for the Privacy Office is 8 The Seneca Way, 7th Floor, Markham, Ontario, L3R 5Y1.