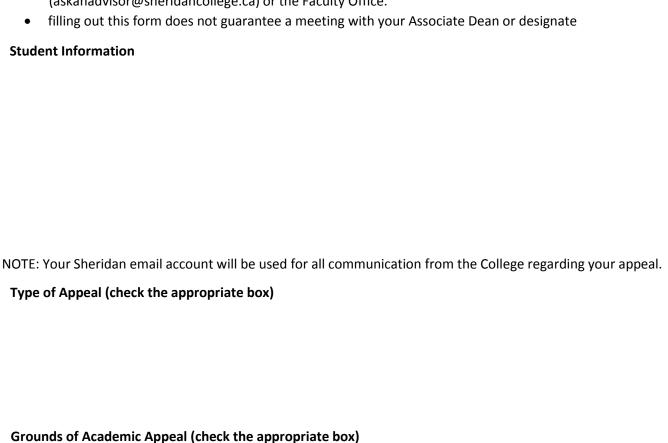


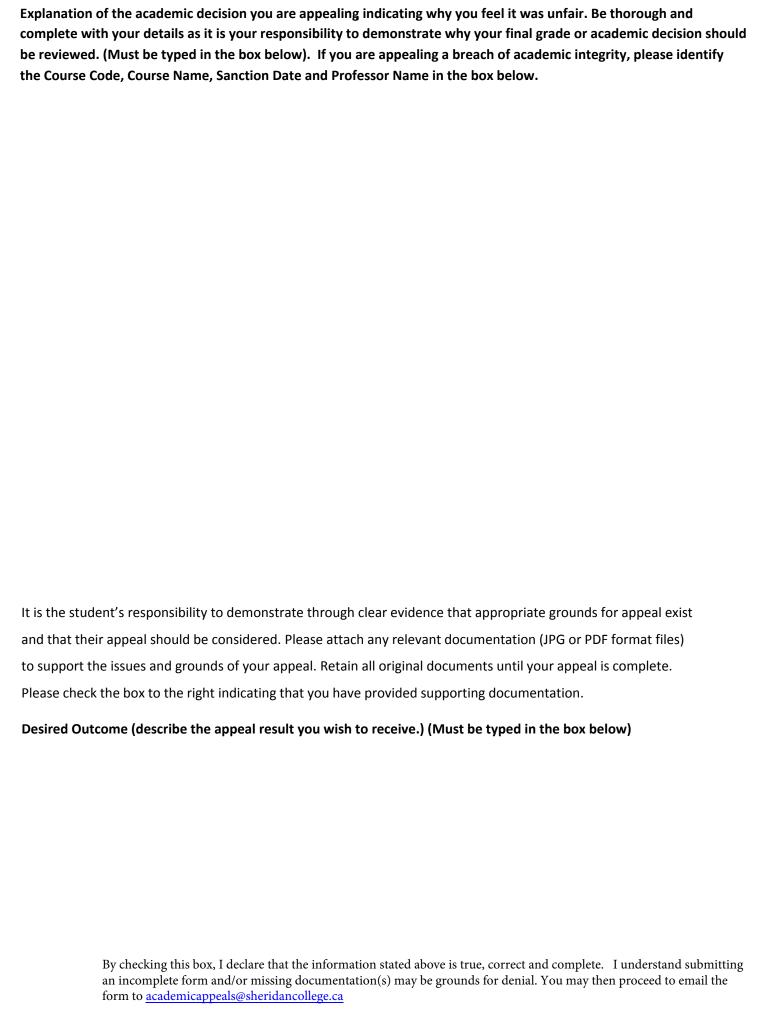
LEVEL 1 ACADEMIC APPEAL FORM

Section A – Student Details

Adhering to Sheridan's Academic Appeals and Consideration Policy and Procedure, this form is to be completed by a student who believes that he/she has received an unfair academic decision from the College. Please refer to the Procedure for associated timelines and note the following:

• if you are considering an academic appeal, you are encouraged to consult with Student Advisement (askanadvisor@sheridancollege.ca) or the Faculty Office.





Section B - FOR OFFICIAL USE ONLY

* Provide form to both Academic Faculty & Director of Career Education
**Provide form to both Academic Faculty & Placement/Practicum Lead
 <u>-</u>

Resulting Outcome - Type in the space below

NOTE: If the appeal results in a change to a final grade, the Associate Dean or designate will complete a Grade Change Form and forward it to the Office of the Registrar for processing

Rationale for Decision

Rationale for Decision (continue)