Loyalist College Academic Appeal Request

Note: Any appeal related to marks or grades must be initiated within ten (10) working days from the issuance of final grades with the faculty who taught the course.

Date:_____ Course Code/Name: _____

Name (Student): _____

Student #:_____Program:_____Semester: _____

Address: _____

Phone Number (Local Residence) :_____Phone Number (Cell) : _____

Email address (Loyalist and other if used): _____

What is the appeal related to? :

- ❑ A penalty for academic dishonesty
- ❑ A penalty for breach of confidentially
- ❑ Actions taken by the College as a result of a student's failure to meet minimum program performance standard
- ❑ A failing grade in a specific course
- ❑ Actions taken by the College as a result of student behaviour at any College approved activity or function, whether organized, informal, on campus, off campus, or online, including inappropriate use of computer facilities or other College property
- ❑ Other issues which may impede a student's academic progress during his/her experience with the College

What are you appealing? ❑ Final Grade ❑ Assignment ❑ Other: _____

Course Name:_____ Course Code: _____

If you are appealing an assignment:

Assignment Title?_____ % weight of Assignment _____

What outcome are you expecting as the result of this review?

_____

_____

_____

Please explain why you believe your grade in the above course/assignment should be reviewed. Add additional pages if necessary.

- ❖ *Please note – complete this section carefully. The documentation you provide here will be used at all stages of the Appeals process, if you decide to advance your appeal beyond the initial stage.*

_____

_____

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Please state clearly the evidence you are bringing forward to support this grade appeal. Use additional pages if necessary and attach any relevant documentation. (Tests, assignments, labs, etc.) If the Professor has retained any assignments or examinations, it is his/her responsibility to provide a copy for the review process.) The supporting documentation you and your professor provide here will be used throughout the appeal process.

	Evidence	Relevance to Appeal
1		
2		
3		
4		
5		

Signature of Student _____ Date _____

FREEDOM OF INFORMATION AND PROTECTION OF PRIVACY ACT

The personal information collected on this appeal request form (including any documentation that you have submitted as pertaining to your appeal), as well as other information/documentation relevant to the appeal hearing will be provided to the professor(s) who assigned the grade or made the decision under appeal and will be shared with the Appeals Committee to be used in making a decision on the appeal.

Personal information is collected for the administrative, investigative and decision-making purposes of the College 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 Ontario Colleges of Applied Arts and Technology Act, 2002, Regulation 34/03. If you have any questions concerning the collection and use of personal information, please contact the College's Freedom of Information and Privacy Protection Officer at 613-969-1913 extension 2331.

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