Faculty of Liberal Arts & Professional Studies

APPEAL FORM

CONTACT:	
Email: lapspet@yorku.	ca
Phone: (416) 650-8193	3

APPEALS MUST BE SUBMITTED TO THE DROP-BOX AT 105 Central Square

1. Personal Information (please print)					
Student Number:		Home Faculty:	Liberal Arts & Professional Studies		
Last Name:		First Name:			
Telephone:		E-mail:			
Keep your information up-to-date! Make sure we have your current contact information. Visit My Personal Info on the My Student Records section of the Current Students Web Site at www.yorku.ca/yorkweb/currentstudents/mystudentrecords					

2a. Appeal of a Grade Reappraisal Result

I am appealing the result of a Grade Reappraisal to the Committee on Student Appeals and Academic Integrity.

The grounds for my appeal are:

Procedural Irregularity (Section 4: http://www.yorku.ca/univsec/senate/committees/sac/documents/sacbrochure.pdf)

I am submitting:

A letter of appeal (a detailed statement of grounds)

A letter explaining why the appeal is being submitted late <u>IF</u> the appeal is being submitted more than 21 days after the notification of the grade reappraisal decision

Documentation to support my claim:

2b. Appeal of a Negative Petition Decision by the Committee on Student Academic Petitions

I am appealing the decision of the Committee on Student Academic Petitions in the Faculty of Liberal Arts and

Professional Studies. On ______ (date of decision letter) the Committee denied my request for:

__(late withdrawal, deferred standing, etc).

I would like the Appeal Panel of this Committee to:

(grant me late withdrawal/ allow me to repeat AK/ADMS XXXX, etc.)

The grounds for my appeal are:

New Evidence (e.g. medical note that I was unable to obtain previously due to....)

Procedural Irregularity (Section 3(b): http://www.yorku.ca/secretariat/senate/committees/sac/appeals.htm)

l am submitting:

	A letter	of	appeal	(a	detailed	statement	of	grounds))
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A letter explaining why the appeal is being submitted late IF the appeal is being submitted more than 30 days after

the day of the petition decision letter

Documentation to support my claim:

(medical form; death certificate; travel documents; etc.)

3. Signature and Declaration

I declare that the information on this form and all statements in the attached appeal letter and supporting documentation are true, complete and accurate. I understand that any misrepresentation of this information may lead to a charge of breach of academic honesty. I consent to the disclosure by York University of personal information including the information I have given on this form and the associated supporting documentation to members of the appeals adjudicating committees and associated administrative staff. I confirm that all the necessary supporting documentation for my appeal is enclosed. I also understand that if any required documentation is missing, my appeal will be cancelled.

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Date: _

Protection of Privacy: Personal information in connection with this form is collected under the authority of The York University Act, 1965. The information will be used to process and adjudicate your petition or appeal and for related record-keeping purposes. If you have any questions about the collection, use or disclosure of this information by York University, please contact the Office of the Associate Dean, Students at 416-650-8193.

	OFFICE USE ONLY:	Date Received:	SCAN	PES
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