Student Appeal Form

Date:__________

Students may request an exception to college policy or procedure when extenuating circumstances have occurred. Carefully read the steps for preparing your appeal before submitting your appeal.

Name:_________________________________________ Student ID or S.S. #:________________

E-mail address:_________________________________ Phone:________________________

Mailing Address:________________________________

City:_________________________________________ State:________________ Zip:__________

Steps for Preparing Your Appeal

Step 1: Prepare a statement that clearly answers the following questions:
   • What do you want to happen as a result of the appeal? Clearly state what you are requesting.
   • Why is the appeal justified? Clearly state the reason you believe your appeal should be approved.

Step 2: Attach supporting documentation of circumstances beyond your control. Be aware that your request may not be processed if you do not include relevant documentation.

Step 3: If you are requesting a course drop, tuition waiver or late withdrawal, check the reason for your appeal:
   □ Student illness/dependent illness
   □ Death or illness of immediate family member
   □ College Error
   □ Other

Please note: After one year, appeals for refunds are not considered. Appeals for late withdrawals and/or refunds based on the following circumstances will NOT be considered:
   • Transportation issues
   • Disregard or lack of understanding of course prerequisites or placement requirements
   • A condition pre-dating the term start date
   • A recurring condition, when previously approved for a prior term
   • Child care issues
   • A condition pre-dating the term/course start date

Return the completed form, along with your statement and documentation to the Student Services Office in person or by fax, e-mail or mail:
Mail: Dakota County Technical College – Appeal Committee
     1300 145th Street East, Rosemount, MN 55068
Fax: 651-423-8775
e-mail: registration@dctc.edu

Student Signature:_________________________ Date:________________

SUBMIT TO REGISTRATION and RECORDS OFFICE.

The Appeal's Committee will make final determination of your request. You will receive notification by mail of the decision on your appeal.

Appeal Results
   □ Approved for □ Tuition waiver and course(s) removed from transcript
   □ Tuition waiver and course(s) remains on transcript
   □ Late course withdrawal
   □ Denied
   □ A decision cannot be made at this time because additional documentation is needed. See Comments below.

Administrator Comments:__________________________________________________________

(Signature of Appeal's Chair)

Date:________________