



Red Lake Nation College Academic Appeal Form

Petition for Semester/Year: Fall _____ Spring _____ Summer _____

Student Information:

First Name: _____ MI: _____ Last Name: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____ Phone: _____

Date of Appeal: _____ Have you appealed before? Yes No

If you have appealed before, please explain the prior circumstances:

When a student is placed on Academic Suspension, they must complete an Academic Appeal/Petition Form to be reviewed by the Progressive Academic Student Success (PASS) Committee. Students must complete this appeal form in the following circumstances:

- Student has already stopped-out the required amount of time following suspension (one semester for the first suspension or granted an appeal to return without the stop-out semester, one calendar year for the second suspension, and two calendar years for the third and subsequent suspensions).
- Student is being placed on Academic Suspension even though they have made significant Academic Progress because they have not met the 67% completion rate and would like to have the Academic Suspension status waived for the upcoming semester.
- Student has been placed on Academic Suspension, but there are extenuating circumstances that impeded their academic performance, and they would like to request the suspension be waived for the upcoming semester in order to demonstrate improved performance.

Students must submit this completed form to the Academic Advisor or Registrar at least two weeks prior to the semester you are appealing for. Each month, the PASS Committee will hold at least one meeting to review incoming appeals. Once a decision is rendered by the Committee, the Vice President of Academic Affairs must also approve or amend the Committee's recommendations. If approved, the student will be allowed to return as a part-time student. Student may return to full-time after the SAP requirements are fulfilled.

Student Statement

This statement should be used to convince the PASS Committee to approve your appeal. You must write at least TWO paragraphs in your statement. Your statement should include two goals for the semester, and a plan to improve your academic progress, if the appeal is granted. If there is not enough room on this page, appeal statements may be submitted in other forms, written or electronically, but they must be included with this form before the Committee can review the appeal:

For Office Use Only

Academic Advisor Comment/Recommendation:

PASS Committee Comment/Recommendation:

PASS Committee Chair: _____ Approved Denied

VP of Academic Affairs: _____ Approved Denied

Financial Aid Coordinator: _____ Approved Denied

Date of Committee Review: _____

Date of Final Decision: _____