

Registration & Records Office PO Box 967 Roseburg, Oregon 97470 541.440.4616 | 541.440.7713 **UMPQUA COMMUNITY COLLEGE** registration@umpqua.edu

Academic Standards Appeal Form

								OFFICE USE	ONLY:
Last Name		First Name		Middle	Initial	Student ID N	Number		
Mailing Addre			City		State	Zip			
Phone Numb	 er			Al	lternate/Me	ssage Phone			
UCC Major:						Currently enr	olled at UCC?	□ Yes □ N	0
TERM & YEAI	R Appeal:	☐ Summer	□ Fall	□Wir	nter □ Sp	ring YEAI	R:		
INC	COMPLET	E appeals (missin	ng infor	mation o	f documer	nts) will NO	Γ be accep	ted.
Section 1 –	STUDENT A	PPEAL INFORI	MATION						
		ne following q							
					ASC2 (Forgive	nace Annaale s	are required to a	ttend)	
								itena)	
	☐ Yes ☐ No Do you want ASC student representatives included in reviewing/hearing your appeal?								
	☐ Yes ☐ No Have you previously appeared before ASC? If so, when:☐ Yes ☐ No Are you appealing Financial Aid?								
□ res □ No	-	-		o Financi	al Aid Satisfa	ctory Academi	c Progress Appe	al Form (Find	uncial Aid
		separate proce	-			-		ai roini. (i iiic	iliciai Ala
I am requesti	ng the follo	wing appeal(s	s):						
☐ LATE WIT	THDRAWAL	: Late withdraw	al from c	ne or mo	re courses fro	m the <u>previou</u>	s term only (incl	ude late withd	rawal denial)
□ COMPLET	ΓΕ WITHDRA	AWAL FROM	A PRIOR	TERM: 0	Complete Wit	ndrawal from a	all courses from a	any given term	l
□ FORGIVE	NESS: See B	oard Policy 709	.03 Acade	emic Forg	iveness.	- -	_	. •	
				_		however, the	committee is aut	horized to ma	ke alternative
accommodatio	-			•	•	•			
Section 2 –	LATE WITH	DRAWAL, CO	MPLETE	WITHDR	RAWAL, AND	OR FORGIV	ENESS only		
Registration CRN	Course Number	Term/Year	_	istration CRN	Course Number	Term/Year	Registration CRN	n Course Number	Term/Year
40420 (Ex.)	MTH 105	Fall/2007							

CRN	Number	
40420 (Ex.)	MTH 105	Fall/2007

CRN	Number	reillij fear

Registration CRN	Course Number	Term/Year

Section	2 _ /	ACADEN	AIC STAND	ARDS APPEAL	CHECKLIST
section	$5-\mu$	ALADEN	IIIC STAND	AKDS APPEAI	- CHECKLIST

ASC Appeal Form Complete – All boxes checked and course/term information included.	Review your academic
transcripts on your Student Self Service account for course/term information.	

- ☐ **Statement Attached** Your statement should be well thought out and include:
 - Late withdrawals address extenuating (beyond your control) circumstances during time period and/or the term prior addressed in your appeal; what prevented you from withdrawing before the published deadline (9th week of fall/winter/spring term; see schedule for summer term 5 & 10 week classes)
 - Outline your plan for academic success what are/will you do differently
 - What resources on/off campus have you or will you access
 - Identify your purposed behavior to improve your academic performance
 - **FORGIVENESS** address how <u>NOT</u> gaining forgiveness will be detrimental to future academic or occupational pursuits past term grades may be damaging or negative to your future educational and/or occupational pursuits. Attendance is mandatory for appeal to be reviewed.

Education Plan Attached – Complete your ASC Appeal Form. Meet with an academic advisor/counselor to complete
or up-date your education plan. Review a degree evaluation and identify remaining courses needed to complete
your certificate or degree.

REQUIRED for all appeals

Supporting Documentation Attached: Signed statement from physician verifying personal illness or injury which prevented
you from withdrawing; signed statement from physician documenting medical illness or injury of immediate family member;
copy of newspaper obituary or death certificate for immediate family member; copy of police reports, proof of automobile
accident, and/or car repair receipts; document or letter of explanation on letter head from professional source (e.g. employer,
social worker, etc.); signed statement or progress report(s) from instructor verifying current term grades; hospital form(s)
showing significant dates that occurred during suspension term.

Section 4 – COMPLETE WITH YOUR	R ACADEMIC ADVISOR		
Reviewed:			
☐ Good Academic Standing/GPA	☐ Retaking D or F earned	grades may improve GPA	
☐ Withdrawal Process/Deadlines	☐ One Time Request for A		
□ VA Benefits/GI Bill	·	ory Academic Progress Policy	
·	_ manetary na satisfacto	ny neadenne i rogress i oney	
Referral(s):			
☐ Financial Aid/VA Rep	☐ Veterans Student Center	☐ Success Center	
☐ Faculty/Progress Reports	☐ Community Resource	☐ Accessibility Services	
☐ Peer Mentors	☐ Director of Advising	☐ Life Coach	
☐ Academic Advisor/Counselor/Face	ulty:		
Referral notes/comments:			
to the best of my knowledge, all	information on this application is	ficient cause for dismissal. I hereby certify true and accurate. I hereby authorize e Academic Standards Committee	
members.	cicuse in y academine records to the	e Alaudenine Standards Committee	
Γ			
Student Signature		Date:	
Signifies Approval & Authorization			
Academic Advisor Signature		Date:	
Signifies Approval & Authorization			
Director of Advicing and Carper For	ulene	Data	
Director of Advising and Career Ser	vices	Date:	
Signifies Approval & Authorization			
OFFICE USE ONLY			
☐ Approved ☐ Approved	I with stipulation ☐ Denied	d □ No action taken	
Approved with stipulation			
Approved with stipulation:			
Comments/Notes:			