



Academic Suspension Appeal


SUSPENSION APPEAL PROCESS

1. Students are notified by letter of their Academic Suspension as a result of their two consecutive semesters of probation. CASC gives students the opportunity to appeal their suspension term and be permitted to re-enroll.
2. Students who wish to appeal their Academic Suspension should complete this form and return it to the Office of Admissions & Records and attach supporting documentation. Appeals also apply to students who exit another college/university under Academic Suspension.
3. On this form, students should provide written explanation of circumstances contributing to the suspension, attach supporting documentation, and explain how behavior, study habits, attendance patterns, ... will be modified to promote grade improvements should the appeal be granted.
4. Examples of supporting documentation could include medical or financial records/statement, written statements by friends/professionals describing personal problems, others.
5. The Suspension Appeals Committee reviews all Appeals and will contact the student with their decision. If approved, the student is permitted re-enrollment and may be required to meet with an Admissions counselor several times per semester to reinforce progress. If denied, the student's Academic Suspension is upheld with the student not permitted enrollment.

STUDENT INFORMATION

Institution of Suspension:	(COLLEGE NAME)	(SEMESTER SUSPENDED)
ID Numbers:	(SOCIAL SECURITY NUMBER)	(CASC ID NUMBER)
Full Name:	(FIRST NAME)	(MIDDLE NAME) (LAST NAME)
Contact Numbers	(EMAIL – CASC STUDENT WEBMAIL OR PERSONAL EMAIL)	(CELL PHONE OR DAY/TIME PHONE)
Address:	(MAILING ADDRESS)	(CITY) (STATE) (ZIP CODE)

In the spaces below, please write details contributing to your suspension and why you should be permitted enrollment with CASC rather than accepting your suspension. Also, explain what will you do different to avoid repeating this poor academic performance. (attach additional sheet and supporting documentation as needed)

 Student Signature: _____ Date: _____

Committee Use Only	
<i>(check one)</i> <input type="radio"/> Uphold Suspension <i>(appeal denied)</i> <input type="radio"/> Grant Appeal of Suspension <i>(approve appeal)</i>	Committee Representative Signature: _____ Date: _____