

Appendix A: Formal Student Academic Accommodation Appeal Form

Please refer to policy section 7.4.16

(To be completed by Appellant when informal process is unsatisfactory)

Please Print

Last Name

First Name

Student Number

I am appealing the academic accommodation because:

- ☐ I disagree with the academic accommodations being provided
- ☐ The accommodations listed on my Academic Accommodation Plan are not being implemented in the classroom/lab/field placement site

Please identify the parties involved:

- ☐ Counsellor: _____
- ☐ Instructor: _____
- ☐ Course Code: _____

Please provide the details of your appeal:

Date: ____ / ____ / ____

DD MM YY

Please submit this form to the attention of the Director,
Student Services

studentservices@stclaircollege.ca

South Campus Room A2110