

FORMAL REQUEST FOR AN ADMISSION APPEAL FOR GRADES BASED PROGRAMS

A \$50 (non-refundable) administration fee is required with this appeal request. Applicants may appeal more than one decision but for each appeal, a separate written request, Admission Appeal Form and payment of \$50 must be made. Please pay at the front counter at the Office of the Registrar, D100. Payment can be made by debit, certified cheque or money order (No cash or credit cards).

The Admission Appeal request must be submitted in writing to the Admissions Office, B101 within ten (10) working days of receipt of the original admission decision. Your letter **must state clearly why the appeal is being requested**, the specific facts that you consider to be grounds relevant to the admission appeal, as well as any previous attempts to address the situation. **If the facts are not clearly specified, the appeal will be disqualified. Requests for a “second review” will not be considered.**

The typewritten letter must be 12 pt. font, single-spaced, 600 words maximum.

Please return this form, a copy of your payment receipt and your appeal letter to the Admissions Office, B101.

Date submitted:	Student Number:
First Name:	Last Name:
Program requesting Appeal:	
Included with this application: <input type="checkbox"/> Letter of Appeal <input type="checkbox"/> Receipt of \$50 administration fee	

Applicant to initial each point below:

	<p>I have reviewed my Admission decision with the minimum academic requirements for this program for this application year. These can be found on sheridancollege.ca under Academics, Programs and Courses. Eligible applicants are selected for programs on the assessment of their previous academic achievement.</p>
	<p>I have spoken with the Admissions Office regarding my admission decision as outlined in Step one of the Admission Procedure. An applicant may contact the Admissions Office to request an explanation for this decision including specific reasons. All requests received by other Sheridan Departments or Schools will be forwarded to Admissions.</p>
	<p>My letter clearly states why the appeal is being requested, specifically identifies the grounds as outlined in the Admission Procedure and all previous attempts to address the situation. Please ensure that this information is included in your letter. If this information is incomplete, your admission appeal may be declined.</p>
	<p>I understand that admission appeal may not necessarily change my admissions decision.</p>

Signature: _____

Date: _____

FOR OFFICE USE ONLY

Your letter of appeal was received on

Date: _____

By: _____