

## **APPEAL PROCEDURE**

1. See a Student Life Counselor in S-343 who will advise and help you fill out this form.
2. Provide an explanation on the Appeal form.
3. For “Withdrawal after official deadline or Review of earned grade”, please have the instructor(s) complete and sign the Instructor’s Supplement to Appeal form on the reverse side of this page.
4. Do not submit original copies of documents.
5. Sign, date and return the Appeal form to the Office of the Registrar in S-315.
6. Once a decision has been made by the Committee on Academic Standing, you will be notified by the Registrar’s Office.

**AN APPEAL FORM WHICH IS NOT COMPLETELY FILLED OUT WILL NOT BE CONSIDERED BY THE COMMITTEE ON ACADEMIC STANDING.**

**NO APPEAL WILL BE PROCESSED WITHOUT THE SIGNATURE OF THE STUDENT AND THE SIGNATURE OF A COUNSELOR IN THE COUNSELING OFFICE, S-343.**



APPEAL TO THE COMMITTEE ON ACADEMIC STANDING

Office of the Registrar

Borough of Manhattan Community College 199 Chambers Street, S315
The City University of New York New York, NY 10007-1097
www.bmcc.cuny.edu tel. 212 220-1290
fax. 212 220-1254

8-digit CUNYfirst ID or 9-digit Social Security Number: \_\_\_\_\_

Last Name First Name Phone

Address (include apartment number if applicable) City State Zip

Email Address \_\_\_\_\_

REASON FOR THE APPEAL:

- Withdraw after the official deadline. Please list courses & semester(s).
Review of earned grade(s) - (F, FAB, FIN, FPN, R, U, and WU). Please list courses & semester(s).
Reinstatement on Special Probation. Indicate semester you were academically dismissed:

What is the basis for your appeal: How did the situation occur? Please attach a statement.

Student Signature Date

PLEASE NOTE: EVERY APPEAL FORM MUST BE SIGNED BY A COUNSELOR IN THE COUNSELING CENTER (S-343) BEFORE IT CAN BE ACTED UPON. THE SIGNATURE MEANS THAT THE COUNSELOR HAS EXPLAINED AND HELPED YOU WITH THE APPEAL PROCEDURE.

Statement by Counselor

Student Life Counselor Signature Date

PLEASE INITIAL YOUR DECISION(S) AND LIST REMARKS
GRANTED SPECIAL PROBATION FOR
DENIED DOCUMENTATION REQUESTED REFERRED TO
REMARKS (including notation of partial action to be taken)
Committee Chair Signature Date

## INSTRUCTOR'S SUPPLEMENT TO APPEAL

\_\_\_\_\_  
Last Name

\_\_\_\_\_  
First Name

\_\_\_\_\_  
8-digit CUNYfirst ID or 9-digit SSN

The above mentioned student is appealing to the Committee on Academic Standing for a Withdrawal after the deadline. The student has presented reasons (and has produced documentation) to support this request. Please be aware that the grade of "W" will not be considered by the Committee on Academic Standing without your approval. On the other hand, even if you agree to a "W" the Committee must still decide whether a "W" is warranted.

- A. Please indicate in the appropriate column whether or not you agree that the student should receive a grade of "W".
- B. It would be very helpful to the Committee on Academic Standing if you add comments/reasons in support of your decision and provide the student's last date of attendance.
- C. If Chair or Deputy Chair is signing in lieu of the instructor, please indicate the reason in the comments/reasons section.

Course/Section #1	Term/Year	Instructor Name	Agree (Yes/No)	Last Date of Attendance	Signature
Comments/Reasons:					
Course/Section #2	Term/Year	Instructor Name	Agree (Yes/No)	Last Date of Attendance	Signature
Comments/Reasons:					
Course/Section #3	Term/Year	Instructor Name	Agree (Yes/No)	Last Date of Attendance	Signature
Comments/Reasons:					
Course/Section #4	Term/Year	Instructor Name	Agree (Yes/No)	Last Date of Attendance	Signature
Comments/Reasons:					
Course/Section #5	Term/Year	Instructor Name	Agree (Yes/No)	Last Date of Attendance	Signature
Comments/Reasons:					