


ADMINISTRATIVE PROCEDURES

Identification: 5.17	Page: 5 of 6	Effective Date: 03-24-16
--------------------------------	------------------------	------------------------------------


Appendix A

	ACADEMIC APPEALS FORM: AWARD OF COLLEGE CREDIT		
Instructions: Working with an advisor, the student completes the form up to the appeal outcome block and attaches any supporting documents. The advisor submits the completed form electronically to the Transcript Evaluation Office, who forwards it to the appropriate director or dean.			
Student Name:		Student ID:	Date:
Street Address:		Apartment/Unit #:	
City:	State:	Zip:	Check here if this is a change in address or phone:
Phone:	HCC Hawk E-mail:		Academic Program <small>(completed by advisor)</small> :
Course Prefix/# _____ Term: _____ Awarding Institution (if not HCC):		Course Prefix/# _____ Term: _____ Awarding Institution (if not HCC):	
Course Prefix/# _____ Term: _____ Awarding Institution (if not HCC):		Course Prefix/# _____ Term: _____ Awarding Institution (if not HCC):	
Briefly indicate why you are filing this dispute:			
I certify the information contained and attached to this document is correct.			
_____		_____	
Student Signature		Date	
Appeal Outcome (supplied by dean, director, and/or campus president):			
_____		_____	
Signature of dean, director, and/or campus president		Date	
Notification of the outcome of the appeal will be e-mailed to the student at his/her hawkmail address. Note: No appeals will be approved after one full calendar year.			

ADMINISTRATIVE PROCEDURES

Identification: <div style="text-align: center;">5.17</div>	Page: <div style="text-align: center;">6 of 6</div>	Effective Date: <div style="text-align: center;">03-24-16</div>
---	---	---

Appendix B

	ACADEMIC APPEALS FORM: GRADE DISPUTE		
Instructions: This form should be completed after the student has attempted to work with the faculty member to resolve the dispute as set forth in the Academic Appeals Procedure. Working with a counselor, the student completes the form up to the appeal outcome block and attaches any supporting documents. The student must submit the completed form to the faculty member's immediate supervising administrator within three working days after meeting with the counselor.			
Student Name:		Student ID:	Date:
Street Address:		Apartment/Unit #:	
City:	State:	Zip:	Check here if this is a change in address or phone: <input type="checkbox"/>
Phone:	HCC Hawk E-mail:		Academic Program <small>(completed by counselor)</small> :
Course #/Prefix _____ Section # _____		Instructor's Name:	
Term Taught _____ Campus _____		Counselor Assigned to Case:	
Briefly indicate why you are filing this dispute:			
I certify the information contained and attached to this document is correct.			
_____ Student Signature		_____ Date	
Appeal Outcome (supplied by dean, director, and/or campus president):			
_____ Signature of dean, director, and/or campus president		_____ Date	
Notification of the outcome of the appeal will be e-mailed to the student at his/her <u>Hawkmail</u> address. Note: No appeals will be approved after one full calendar year.			