



# REGISTRAR'S OFFICE

1537 University Boulevard, Morrilton, Arkansas 72110

1-800-264-1094 | (501) 977-2052 | fax: (501) 354-7566 | [www.uaccm.edu](http://www.uaccm.edu)

## **Guidelines for an Academic Suspension Appeal**

To successfully appeal an academic suspension, you must convince the Academic Standards Committee and the Vice Chancellor for Academic Services that returning to UACCM before your suspension period is completed is the best strategy for you to be academically successful.

The Committee evaluates your answers to the questions on the appeal form, documentation related to your circumstance, and academic record to see if there is a compelling reason why you should be allowed to enroll before your suspension period is complete. The Committee will then forward their recommendations to the Vice Chancellor for Academic Services for a final decision.

### **Reasons for appealing an Academic Suspension/Dismissal**

Examples of extenuating or extraordinary circumstances that may be considered acceptable for your appeal include, but are not limited to, the death of an immediate relative, serious illness of a family member or yourself, recent diagnosis of a learning disability or emotional disorder, severe financial issues, or personal crisis.

### **Documentation**

The Academic Standards Committee requires documentation related to your particular circumstance. Examples of such documentation may be a physician's statement, proof of recently diagnosed disability, verification of visits to a mental health counselor, or verification of absences required to deal with family issues. Other forms of documentation may be more relevant for different circumstances.

### **Committee Recommendations and Final Decision**

The recommendations of the Academic Standards Committee will be forwarded to the Vice Chancellor for Academic Services for a final decision. If the committee recommends approval of the appeal, they will make specific recommendations and requirements, such as limiting the number of credit hours you may take in the semester, specific course recommendations, or participation in student success workshops. The Vice Chancellor for Academic Services will notify you in writing the final outcome the appeal. Health insurance and/or financial aid eligibility will not be factored into the final decision.



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## Academic Suspension/Dismissal Appeal Form

Name \_\_\_\_\_ Student ID # \_\_\_\_\_

Current Address \_\_\_\_\_  
STREET CITY STATE ZIP

Current Phone Number \_\_\_\_\_  
CELL PHONE HOME PHONE

Current E-mail Address \_\_\_\_\_

What is the name of your Academic Advisor? \_\_\_\_\_

In the past year, how often have you met with your Academic Advisor?

Never  1-2 times  3-5 times  6 or more times

Place an X by the college services you've used in the past year:

Academic Commons/Tutoring  Disability Support Services  Career Services  
 attended campus workshops that promote Student Success  Counseling

### **Suspension Appeal**

If appeal is granted, how many credit hours would you like to take in the upcoming semester? \_\_\_\_

If appeal is granted, do you plan to work while attending college? \_\_\_\_

If yes, how many hours per week? \_\_\_\_

### **2<sup>nd</sup> Suspension Appeal**

How many credits do you lack to receive a degree/certificate at UACCM? \_\_\_\_

Do you understand that if allowed to return, you must show academic progress every future term? \_\_\_\_

If appeal is granted, do you plan to work while attending college? \_\_\_\_

If yes, how many hours per week? \_\_\_\_

**Do you want to appear before the Committee to explain your circumstances?** \_\_\_\_\_

Your letter of notification for suspension will include the time and date the Academic Standard's Committee will meet. If you are unavailable at the time of the meeting, the Committee will still meet and make a decision regarding your appeal.



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**Provide typed responses to the following questions on a separate sheet of paper.**

1. What extenuating or extraordinary circumstances contributed to your lack of academic success? Explain how the circumstances impacted your academic performance. Provide the Committee appropriate documentation about your circumstances.
2. Explain how the circumstances have been resolved that will allow you to perform at a satisfactory academic level.
3. What strategies and resources do you plan to use that will help you be academically successful?
4. Why should the Committee grant your appeal and allow you to return to UACCM the following semester?
5. What additional information do you want the committee to consider in the review of your appeal?

\_\_\_\_\_  
STUDENT SIGNATURE

\_\_\_\_\_  
DATE

**Return this form, your responses to the questions, and any documentation to:**

Office of the Registrar  
1537 University Blvd  
Morrilton, AR 72110

### OFFICE USE ONLY

<p><b>Recommendation of the Academic Standards Committee:</b>  <input type="checkbox"/> Approved      <input type="checkbox"/> Denied</p> <p>Comments/Restrictions:</p>          <p>_____ SIGNATURE OF COMMITTEE CHAIRPERSON</p> <p>_____ DATE</p> <p><b>Decision of the Vice Chancellor for Academic Services:</b>  <input type="checkbox"/> Approved      <input type="checkbox"/> Denied</p> <p>Comments/Restrictions:</p>          <p>_____ SIGNATURE OF VC FOR INSTRUCTION</p> <p>_____ DATE</p>	<input type="checkbox"/> 1 <sup>st</sup> Suspension <input type="checkbox"/> 2 <sup>nd</sup> Suspension <input type="checkbox"/> 3+ Suspension
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