



Petition Appeal

Must be accompanied by a copy of your denied Petition.

Petition Policy 3.7

Students seeking an exception to certain policies or procedures may submit a completed Petition form for consideration. Petitions should be filed in the semester of occurrence, but no later than one year following. Students will be notified of the decision via their LSC student email account within ten (10) working days of receipt of their requests.

Students have the right to file an appeal to the designated administrator if their Petition is denied. Appeals must be filed within ten (10) working days from the receipt of the Petition decision. Appeal decisions will be communicated within ten (10) working days and shall be considered final and binding.

- It is recommended that you seek assistance from a Professional Advisor in completing this form.
- If you have not received notification within ten working days, contact the Student Services Center at 218-723-4918.

Return completed petition appeal form to the Student Services Center. You may fax your complete petition appeal to 218.733.5945.

In order for your appeal to be considered, additional supporting evidence and/or documentation not provided in your original Petition must be included.

Section A-Please print clearly

Full Name _____ Student ID# _____

LSC e-mail address _____ (current students)

Street Address _____

City _____ State _____ ZIP _____ Phone _____

Date _____ Semester and year to which Appeal applies _____

(Example: Fall 2009)

Section B-I respectfully appeal the following:

a. Drop courses/remove charges

b. Withdrawal after deadline

c. Credit overload (over 18 per semester)

d. Course substitution or waiver of program requirements

Instructor signature/recommendation required in Section D

e. Switch sections of the same course (with/without financial aid eligibility)

Instructor signature/recommendation required in Section D

f. Late add -**Instructor signature/recommendation required in Section D**
Course (ex. ENGL 1106-01) _____ Six digit course ID _____

g. Financial Aid eligibility for late add
Course (ex. ENGL 1106-01) _____ Six digit course ID _____

h. Continuation of financial aid past the 150% maximum timeframe

i. Other: _____

Decision Maker:

a. VP of Finance & Administration

b. VP of Academic Affairs

c. VP of Student Services

d. VP of Academic Affairs

e. VP of Academic Affairs

f. VP of Academic Affairs

g. VP of Student Services

h. VP of Student Services

i. To be determined

Section C

State your request and rationale clearly and concisely. Attach supporting documentation and additional sheets if necessary. If sufficient information and additional supporting evidence or documentation are not provided, your appeal will not be considered.

Student Signature _____ Date _____

Section D

LSC Faculty/Staff comments and recommendation (optional): _____ Date _____

Name _____ Signature _____

OFFICE USE ONLY-Decision Maker Signature and Comments

Section E

Action: Granted in full _____ Granted in part _____ Denied _____ No action _____ Date _____

Comments: _____

Authorized
Signature _____ Title _____