

Petition to Appeal Form

Name: _____ Date: _____

School: _____

SECTION A

A. Reason for appeal: _____

B. Which section in Post Secondary Guidelines are you appealing? _____

C. Relevant information: _____

D. What are you asking for? _____

Student signature: _____

Date: _____

SECTION B

Manager's Review and Recommendations:

Appeal Warranted: _____ **If yes, conditions if any:** _____

Yes

No

Manager's Signature

Date

SECTION C:

If appeal is warranted: _____

Appeal Committee Recommendation and Reviews: _____

Appeal Committee:

Councillor

Councillor

Councillor

Date

Office Use Only:

Copy of Petition to Appeal to Student