Stephen F. Austin State University James I. Perkins College of Education

Academic Appeal Form: Academic Decisions

Student Name:		Campus ID #: .	
Phone:	SFA Email:		
Major:		Current GPA:	
Reason for appeal:			
Course (if applicable:)	Instructor:	Semester:	
In order to further appeal/dispu			
Please read the appeal policy for	deadlines and important in	formation before proceedin	g with the appeal process.
1. Appeal to the Instructor:			
Instructor:		Appeal Date:	Approved/Denied
Recommendation from Instructor: _			
Instructor Signature:		Date:	
2. If not satisfied with Instructor's	recommendation, you ma	y appeal to the Departmen	tal Chair/School Director:
Departmental Chair:		Appeal Date:	Approved/Denied
Recommendation of Departmental C	hair:		
Departmental Chair/School Director	· Signature:		Date:

Associate Dean: Dr. Stacy Hendricks Appeal Date:
To appeal to the Associate Dean, page 1 must be completed in full and all supporting documentation must
be included. Your appeal must be a formal typed letter, including: 1.) the reason of your appeal, 2.) details
and outcome of your initial appeal meeting with the Instructor, 3.) details and outcome of your appeal with
the Departmental Chair, and 4.) what you are seeking to achieve moving forward. Completed form, typed
letter and all supporting documentation are to be emailed to coestudentservices@sfasu.edu or dropped off to
Dr. Hendricks' front office desk in McKibben 118.
Recommendation of Associate Dean:
Associate Dean Signature: Date:

3. If not satisfied with Chair/Director's recommendation, you may appeal to the Associate Dean:

4. Once an appeal is decided on upon by the College of Education Academic Associate Dean, if still not satisfied with the outcome you have the right to submit a formal written appeal to the <u>Provost & Executive V. P. for Academic Affairs.</u> All documentation from previous appeal steps must be included with your appeal. The decision made by the Provost and Vice President for Academic Affairs is final.