

**University of Colorado at Colorado Springs
College of Education**

Professional Education Programs
APPEAL/EXCEPTION FORM

This form is to be used for an appeal when a student is:

- (1) denied admission to professional education program
- (2) denied permission to student teach or complete professional internship
- (3) removed from a professional education program or internship
- (4) denied permission to graduate due to missing requirements
- (5) requesting an exception to specific policies, procedures, or requirements
- (6) requesting a grade change

This form is not to be used for requests to take classes out of sequence or to take a class without the proper prerequisites. Such requests should be initiated with the department chair. The student must initiate the professional education appeal. All appeals/exceptions must be presented to the Associate Dean for the College of Education no later than 12:00 noon on Wednesday during the week prior to classes beginning in order for the request to be considered for the start of the coming semester. The Dean will consider appeals/exception requests denied by the Associate Dean. Appeals submitted after the above deadline or at other times during the semester will be reviewed within a reasonable time frame.

No appeal will be upheld, or exception granted, without all required documentation. Until the appeal or exception is approved through the Associate Dean; the student will not be granted permission to engage in the requested professional education activity.

Student's name _____ Student ID# _____

Phone _____ Cell _____ E-mail _____

COE Department _____

College of Education status: ___ Not admitted ___ Admitted

I am (circle one):

1. appealing an action
2. requesting an exception
3. appealing a grade

Describe your appeal or request and provide a rationale (attach documentation if necessary):

I understand that this request is an exception to the policies, procedures or requirements of my Department/Program. I am willing to accept the consequences that occur as a result of this appeal. I understand that the request is not granted until it has been approved by the Associate Dean of the College of Education.

Signature _____ Date _____

In some instances, the student may be asked to provide an official transcript. The student will present the entire request package for approval to the appropriate faculty member (for example, if student is appealing a course grade, the appeal is submitted to instructor or if student is appealing acceptance to a program, appeal is submitted to Department Chair or Director of Teacher Education).

1. Recommendation of the Professor (if appropriate):

_____ (print name)

I recommend approval/denial of the above request for an appeal/exception to the professional education program's policies, procedures, or requirements. (Professor must provide a written statement of justification; attach documentation if appropriate.)

Signature of Professor: _____ Date: _____

2. Recommendation of the Department Chair or Director of Teacher Education:

_____ (print name) *

I recommend approval/denial of the above request for an appeal/exception to the professional education program's policies, procedures, or requirements. (Department Chair must provide a written statement of justification; attach documentation if appropriate.)

Signature of Department Chair or Director of Teacher Education Program:

_____ Date _____

*In the event that the Chair is also the instructor, a Chair from another department will review and sign.

3. Recommendation of Grievance Committee Chair:

_____ (print name)

The Grievance Committee recommends approval/denial of the above request for an appeal/exception to the professional education program’s policies, procedures, or requirements.

Signature of Grievance Committee Chair: _____

Date: _____

4. Recommendation of the Associate Dean of the College of Education:

_____ (print name)

I recommend approval/denial of the above request for an appeal/exception to the professional education program’s policies, procedures, or requirements.

Conditions or terms of the approval:

Signature of Associate Dean: _____ Date: _____

Upon approval of the request by the Associate Dean, the request has been granted. It is the student’s responsibility to meet the terms set forth and the follow up the granted request with any action necessary to implement the request (i.e. register for the class).

I agree with the terms of approval listed above and understand that it is my responsibility to take the necessary step(s) to implement this action.

Signature of Student: _____ Date: _____

Upon denial of the request by the Associate Dean, the student may appeal the decision to the Dean of the College of Education.

A copy of the request packet is to be placed in the student’s advisement file and a copy is to be sent to the Associate Dean, College of Education.

I understand that my appeal/request for exception has been denied. I do not wish to further pursue this appeal/request for exception.

Signature of Student: _____ Date: _____