

St. Lawrence College Admissions Appeal Request

Note: Any appeal related to marks or grades must be initiated within five working days from the admissions decision.

Personal Information	
Last Name:	First Name
Student ID:	Applicant ID:
Program Code:	Academic Year/Semester:
Status in Canada:	
Canadian citizen	Permanent resident
Student Authorization (visa)	Other
Phone (Home):	Phone (Cell):
Email (SLC and other if used):	

What is the admissions appeal related to?	
Secondary school transcript	Post secondary education
Education requirements	Education equivalencies
Related work experience	Other:

What outcome are you expecting as the result of this review?

Please explain why you believe your admission decision should be reviewed. Add additional pages if necessary.
❖Please note – complete this section carefully. The documentation you provide here will be used at all stages of the Appeals process.

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Please state clearly the evidence you are bringing forward to support this admissions appeal. Use additional pages if necessary and attach any relevant documentation. (Transcripts, Resume, letters of reference, etc.) The supporting documentation you provide here will be used throughout the appeal process.

	Evidence	Relevance to Appeal
1		
2		
3		
4		
5		

Signature of Applicant:

Date:

FREEDOM OF INFORMATION AND PROTECTION OF PRIVACY ACT

The personal information collected on this appeal request form (including any documentation that you have submitted as pertaining to your appeal), as well as other information/documentation relevant to the appeal hearing will be provided to the individual(s) who made the decision under appeal and will be shared with the Appeals Committee to be used in making a decision on the appeal.

Personal information is collected for the administrative, investigative and decision-making purposes of the College in accordance with sections 21, 39 and 49 of the Freedom of Information and Protection of Privacy Act and under the legal authority of the Ontario Colleges of Applied Arts and Technology Act, 2002, Regulation 34/03. If you have any questions concerning the collection and use of personal information, please contact the College's Privacy Office at PrivacyOffice@sl.on.ca

<Office Use Only>

ASSOCIATE REGISTRAR'S RECOMMENDATION:

RECOMMENDED BY:

DATE:

REGISTRAR'S DECISION:

SIGNATURE:

DATE:

REGISTRAR'S OFFICE USE:

Admission Status: : Waiting documents Conditional Offer Final offer Enrolled

Date Received: _____ Date Completed: _____

RO Staff: _____ Department: _____