

Office Use Only	
Processed by	Date
<input type="text"/>	<input type="text"/>

Please note: This form can be submitted electronically to sr.appeals@ryerson.ca.

Student Information - (Please print clearly).

<input type="text"/>

Ryerson Student Number

<input type="text"/>

Ontario Education Number (OEN) (Optional)

Last Name

First Name(s)

Program

Career

<input type="checkbox"/> Undergraduate	<input type="checkbox"/> Continuing Education	<input type="checkbox"/> Graduate
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Term

<input type="checkbox"/> Fall	<input type="checkbox"/> Winter	<input type="checkbox"/> Spring/Summer	Year <input type="text"/>
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Academic Standing Revision

Previous Academic Standing: _____

Revised Academic Standing: _____

Reason (REQUIRED)

<input type="checkbox"/> Appeal Decision (PRB1)	<input type="checkbox"/> Probationary contract violation override	<input type="checkbox"/> Other (explanation required below)
<input type="checkbox"/> Compassionate grounds (PRB2)	<input type="checkbox"/> Grade Revision	

Explanation (Limit of 300 characters)

Please provide Student Records with all supporting documentation.

Authorization

Chair/Director's Approval (REQUIRED)

_____	_____	_____
Print Name	Signature	Date

In exceptional circumstances, further authorization may be required.

Dean's Approval

_____	_____	_____
Print Name	Signature	Date

Registrar's Approval

_____	_____	_____
Print Name	Signature	Date