

Filing deadlines: one month before the fall semester or one week before the spring semester.
Appeals received after the deadline will be considered for the next semester.

First Middle Last Name	Date of Birth:	Social Security Number:
Address:	City:	State: Zip:
Email address:	Home Phone:	Cell Phone:
Cell phone carrier: <input type="checkbox"/> US Cellular <input type="checkbox"/> Verizon <input type="checkbox"/> AT & T <input type="checkbox"/> Tracfone <input type="checkbox"/> Other _____		Text Updates: ___ Yes ___ No
WCCC Program returning to:	Planned Semester/Year of Enrollment: Summer <input type="checkbox"/> Fall <input type="checkbox"/> Spring <input type="checkbox"/> 20____ Enrollment type: <input type="checkbox"/> Part-time <input type="checkbox"/> Full-time	

In order to be readmitted into a program of study at WCCC and be eligible for financial aid, you are required to complete the appeal process by submitting this form and supporting documentation. If you have not been a student at WCCC for more than one year, it is also necessary that you complete WCCC's Application for Admission for submission with this appeal. The Student Success Team will review your appeal to determine enrollment and financial aid eligibility. **Your attendance at our meeting is MANDATORY.** The decision of the committee shall be final and will be communicated in writing within five working days of the appeal hearing. ***Appeals will not be considered without appropriate supporting documentation and a detailed response to each of the following items, or if there is a previous registration hold on your record.***

Supporting documentation: Your responses should be provided on separate sheets of paper and ***be specific in your explanation*** since incomplete information may cause a delay in the review of your appeal or a denial of your request. All statements provided should be typed.

1. Describe the specific reasons and circumstances that caused you to fail to meet the required standards. It is important that you demonstrate a clear and thorough understanding of why you experienced academic difficulties so that you will be able to take sufficient steps in the future to improve your academic performance.
2. Provide a second statement outlining the specific steps you intend to take in the next semester to improve your academic performance. This statement should be thorough and detailed, demonstrating your commitment to achieving the required grade point average and/or percentage of completed credits.
3. Attach documentation that supports your appeal. If, for example, the deficiency was caused by medical problems or personal injury, provide supporting evidence from a physician or hospital. Other forms of documentation might include a letter from a counselor or therapist, copy of obituary or death certificate in the case of the death of a family member, etc.
4. If the deficiency was the result of special academic circumstance, you should attach a statement from your academic advisor, department chair or other academic personnel which demonstrates that you have sought their assistance in developing a plan of academic support that will assist you in meeting the standards of satisfactory academic progress.
5. Sign and attach this form to your written statements and documentation and submit it to: Nichole Cote, Associate Dean of Student Affairs & Retention, Washington County Community College, One College Drive, Calais, ME 04619

I certify that all the information contained in this appeal is accurate and complete.

Student Signature _____ **Date** _____