

Appeal for Permission to Continue For Students Required to Withdraw/Discontinue Studies from the Bachelor of Commerce program

| Student Information Last Name: | Given Name(s): | Preferred Name (if any): | | | |
|---|---|--------------------------|--|--|--|
| UBC Student Number: | Current UBC Year Level: | Email: | | | |
| Appeal Information: Please provide information on your most recent winter session. What was your average for the winter session? (e.g., 50%) | | | | | |
| How many credits did you attempt in the winter session? How many credits did you pass with a final grade of at least 50%? (e.g., 18 credits attempted, 12 credits passed) | | | | | |
| | nich you believe impacted your academic | | | | |

Please summarize the circumstances which you believe impacted your academic success this year on the next page. Include supporting documentation as necessary (e.g., if your extenuating circumstances were medical, include doctors' notes or other official medical documentation). The level of detail that you provide regarding any medical or other personal circumstances is up to you. Be sure that you are comfortable with the amount of detail that you are providing.

It is important to note that you must submit your complete appeal in one submission; that is, all of the circumstances that you would like to be considered with all supporting documentation. Once a decision has been made on your appeal, you will not be able to submit additional information or documentation unless it refers to a situation or condition that was unknown to you at the time of your original appeal (e.g., a new medical diagnosis).

Please limit your summary to 300 words.

form and supporting documentation to them. Select an Academic Advisor from the drop down menu.

NOTE THAT SELECTING AN ADVISOR WILL NOT AUTOMATICALLY GENERATE AN EMAIL.

| For Bachelor of Commerce Academic Review Committee Use Only: | | | | |
|--|----------------------|--|--|--|
| Comments: | | | | |
| Decision Appeal accepted Appeal denied; Required to discontinue/withdraw | Restrictions, if any | | | |
| Additional Notes | | | | |
| Names of all reviewers | | | | |
| Date decision sent to student via SISC | | | | |