



ACADEMIC SUSPENSION APPEAL FORM

Student _____ ID # _____

Cell phone: _____

Email address: _____

Home address: _____

If my appeal is granted, I will return to Lincoln College in the fall semester of 2020.

In order to appeal academic suspension, you must complete the following steps and forms by **June 19, 2020 at 5:00 pm.**

1. Complete this ACADEMIC SUSPENSION APPEAL FORM indicating the faculty members you will seek recommendations from below.
2. Complete a LETTER OF APPEAL by following the template provided below. *The letter must be typewritten; handwritten letters will not be accepted.*
3. **Have two faculty members** complete an ACADEMIC APPEAL FACULTY FEEDBACK FORM (available below). The student will send the form to the selected faculty members; each faculty member will submit the form to the Chair of the Academic Appeals Subcommittee, Dr. Monica Overton.
 - a. One faculty feedback form must come from the faculty member teaching the course in which you received the lowest grade (or expect to receive the lowest grade).
 - b. The second faculty feedback form can be any other faculty member that teaches a course in which you were enrolled (during the semester in which you went on suspension).
 - c. Please list the faculty members who will be completing your recommendation forms:

i. _____

ii. _____

4. Submit this Appeal Form and the Letter of Appeal via email to academicappeals@lincolncollege.edu by **June 19, 2020 at 5:00 pm.** (Letter of Appeals should be addressed to Dr. Monica Overton, Chair of Academic Appeals Subcommittee as indicated in the template below).
5. The Academic Appeals Subcommittee will review your appeal on **June 25, 2020.**
6. You will be notified via email and letter by the Academic Affairs Office regarding the subcommittee's decision by **June 29, 2020.**

TEMPLATE FOR LETTER OF APPEAL

DATE

Dr. Monica Overton
Academic Appeals Subcommittee
Lincoln College
300 Keokuk Street
Lincoln, IL 62656
academicappeals@lincolncollege.edu

Dear Dr. Overton:

Paragraph 1: Explain in detail the circumstances that led to your academic suspension.

Paragraph 2: Provide assurance that you can overcome the difficulties that lead to your academic difficulties.

Paragraph 3: Describe in detail your plan-of-action to achieve academic success in the subsequent semester.

Sincerely,

Student's name
Student's address
Student's cell phone & email address



ACADEMIC APPEAL FACULTY FEEDBACK FORM

Student _____ Date _____

Please rate the student on the following scale with 1 indicating the lowest score and 5 indicating the highest score.

						COMMENTS
Class attendance	1	2	3	4	5	
Completion of assigned work	1	2	3	4	5	
Demonstrated attitude toward success	1	2	3	4	5	
Demonstrated a respectful attitude	1	2	3	4	5	
Ability to be successful next semester	1	2	3	4	5	

Please list the primary barriers you have witnessed to this student’s academic success.

Other comments related to the appeal process, e.g., student strengths, other concerns or suggestions.

Faculty Signature

Date

Faculty member: Please email this form to Dr. Monica Overton, no later than June 19, 2020 at 4:00 pm; please do not return to the student. (Dr. Overton’s email: moverton@lincolncollege.edu.)



ACADEMIC APPEAL FACULTY FEEDBACK FORM

Student _____ Date _____

Please rate the student on the following scale with 1 indicating the lowest score and 5 indicating the highest score.

						COMMENTS
Class attendance	1	2	3	4	5	
Completion of assigned work	1	2	3	4	5	
Demonstrated attitude toward success	1	2	3	4	5	
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Ability to be successful next semester	1	2	3	4	5	

Please list the primary barriers you have witnessed to this student’s academic success.

Other comments related to the appeal process, e.g., student strengths, other concerns or suggestions.

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