Coon Rapids Campus
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ANOKA-RAMSEY
COMMUNITY COLLEGE
CAMBRIDGE • COON RAPIDS

Suspension Appeal Form

BLACK INK ONLY!

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☐ **Academic & Financial Aid appeal** ☐ **Financial Aid appeal only**

☐ **Coon Rapids Campus student** ☐ **Cambridge Campus student**

Suspension is due to my performance at: ☐ ***Anoka-Ramsey*** ☐ ***Another MnSCU Institution*** ☐ ***School Outside of MnSCU System***

Student Section: (please print)

Name: _____ Student ID # _____
Last First M.I. Former

Day Phone (_____) _____-_____ Eve Phone (_____) _____-_____

EMAIL_____

APPEAL RESULTS AND COMMUNICATION WILL BE SENT TO THIS EMAIL

Street Address:_____

City, State, ZIP _____

ARCC Major/Degree _____

Most recent term of attendance _____ Term seeking to return _____

Number of credits requesting _____ Number of hours employed during returning term _____hours/week

Suspension Appeal/Re-Appeal Schedule	
Term Suspended	***Appeal/Re-Appeal Deadlines***
Appealing to return Spring, 2012 semester	January 4th, 2012, no later than 4:00 p.m.
Appealing to return Summer, 2012 semester	May 24th, 2012, no later than 4:00 p.m.
Suspended Spring, 2012/Appealing to return Fall, 2012	July 2nd, 2012, no later than 4:00 p.m.
Appealing to return Fall, 2012	August 16th, 2012, no later than 4:00 p.m.

APPEALS missing the requested documentation below will be denied.

1. **Detail extenuating circumstances* below (or attach response) (*included but not limited to the death of a family member, student injury, illness or hospitalization) that negatively affected your academic progress.**

ATTACH DOCUMENTATION: i.e. statement from medical facility, obituary, etc. (please do not attach documents needing to be returned).

_____

_____

_____

_____

2. **What plans have you made to resolve the circumstances you described above?**

ATTACH DOCUMENTATION, i.e. academic plan or progress report made with an advisor, transcripts from another school supporting successful completion of courses, etc.

_____

_____

_____

_____

3. **You must meet with an Advisor to make an Academic Success Plan.** The Academic Success Plan must be submitted with the completed appeal.

4. **You must submit unofficial copies of transcripts from each institution you have previously attended.**

APPEALS WITHOUT DOCUMENTATION WILL BE DENIED! YOUR SIGNATURE IS REQUIRED!

Student Signature _____ **Date** _____

All appeals need to be turned in to the Office of Student Life, SC122, Coon Rapids Campus

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SUSPENSION APPEAL
Guidelines and Expectations

Appeals will be considered in accordance with the guidelines and expectations below. Please read and initial each line below and sign the certification at the bottom to indicate your understanding of each point.

_____ I understand that Anoka Ramsey Community College reserves the rights to cancel my registration for subsequent terms without notice should I fail to meet the conditions outlined within this appeal.

_____ **I UNDERSTAND THAT ANY COMMUNICATION REGARDING THIS APPEAL, INCLUDING RESULTS AND FOLLOW-UP OF THIS APPEAL WILL BE EMAILED TO THE EMAIL ADDRESS PROVIDED ON THE FRONT OF THE SUSPENSION APPEAL.**

_____ I understand all requested documentation (1-4) on the front of the Suspension Appeal must be completed and submitted with this appeal.

_____ I understand I will be required to register for approved courses in person at the records office window and will need an advisors signature.

_____ I understand that I am financially obligated for any course that is not dropped, even if I have not attended the course.

I have read and understand each of the above:

Student Signature _____ **Date** _____