Coon Rapids Campus Jennifer Christensen C211 11200 Mississippi Blvd. NW Coon Rapids, MN 55433

Fax: 763-433-1321

suspension@anokaramsey.edu

Cambridge Campus Appeals may be turned in at the Information Desk.

Fax: 763-433-1321 suspension@anokaramsey.edu

Suspension ☐ Appeal ☐ Re-appeal Form

			Type of Suspension	n 🗆 Aca	ademic and	Financial	Aid		Financial Aid Only
Name:									Student ID #
	Last		First	M.l		Former			
Day Pho	one ()	_		I	Eve Phone	() _	-
EMAII	ــ:								
The s	goal of th			ision comm		derstandir	ıg yoı		e all of the 10 steps below: nation, what has changed, and how you will be
	Attach	required in	nformation: (Impor	tant – App	eals subm	itted witho	out re	quire	d documentation will not be reviewed).
□ 1 .	You mu	ıst provide a	a typed statement	explaining	your reaso	ns (extenu	ating	circu	mstances) for falling below the academic
standar									
a result 2.0 GPA stateme	of at least A and/or nt. What w 1. 2.	st two or mo the minimu were the fact Lack of b	ore consecutive sem m cumulative 67% ors that led to your asic skills (math/rea or credits (with other	nesters of position earned consistency suspension adding/writing	erforming in pletion rate (be compared)	below the te. Below lete)? Son 7.	Anok are s me ex Medio Attitu	ca-Rai ome l ample cal/He	ealth Issue
b) c)	5. 6. What is	Relationsl Lack of m s the role yo	career direction-no nip problems notivation u played in the circ ement before subm	umstances		11.		e situa n in fa	
	ed, provi								olve the extenuating circumstances you have e helpful hints you may want to include in your
	a.		you do to ensure fu efine your academic			esources a	aroun	d the	college are you going to use?
	c.					t same cir	cumst	tances	s from affecting your student success in the
	d.	Proofread	your statement bef	ore submis	sion.				
beyond	your cor	ntrol and wi	ll not need supporti	ng docume	ntation)			_	cumstances (not all extenuating circumstances are ledical Verification Form completed by your

medical provider), family or court emergency (legal statement), birth (birth certificate), death in the family (obituary or card from a service), work (letter from employer), etc.

- Students with injury or illness extenuating circumstances should have their medical provider complete the "Medical **Verification Form**" as their supporting documentation.
- 4. You must submit unofficial transcripts from each higher education institution you have previously attended (other than Anoka-Ramsey Community College).
 - a. It is a student's responsibility to submit unofficial transcripts with your appeal.
 - b. Students who have submitted transcripts to the Records and Registration office of Anoka-Ramsey Community College will *still need to submit* unofficial transcripts with their appeal.
 - Follow these instructions to print an unofficial Minnesota State transcript: Go here http://www.anokaramsey.edu/resources/transfer/transcript-requests/ to print unofficial transcripts Login using your Star ID and Password:
 - 1. Click the check box for your name to display on your unofficial transcript
 - Click "HOME" in the upper left hand corner
 - 3. Click the institution in the middle of the page you want to print an unofficial transcript for
 - 4. Click "Grades and Transcripts" on the left hand side of page
 - 5. Click "Academic Record" on the left-hand side of page
 - Choose format and click "Get Academic Record"
 - Click Print

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Department	O N 1	* * * * * * * * * * * * * * * * * * * *	C Tru	G 194
Depair timent	Course Number		Course Title	Credits
			Total Credits	1
			Total Cicuit	
☐ 6 . What will vo	our weekly class/study/w	ork commitment look l	ike?	
Number of		ass/Study Hours	Work Hours (per week)	TOTAL
				_
	X 3	_	+ =	
☐ 7. Complete the				
	nmunity College Major/	Degree		
Most recent term of				
Term seeking to retu	urn			
	1/2 / 12 /			
8. Suspension A		lines: All appeals/re-a	ppeals <u>must</u> be received by the deadli	
	Term Suspended		Appeal/Re-Appea	
Annealing for Sprin	ng, 2017 semester – Studer	nts annealing	(Deadlines are firm, late a	ppeais wiii be aeniea)
Suspension from and	other higher education institute	ution or on Suspension	December 16th, by 4:00 p.m.	
from a previous enro	ollment at Anoka-Ramsey C	Community College.	becomeer to , by 4.00 p.m.	
	ng 2017 comporter Studen	. 1'		
Appealing for Sprin				
Suspension at Anoka	a-Ramsey Community Coll		January 4 th , by 4:00 p.m.	
Suspension at Anoka semester only	a-Ramsey Community Coll	ege from Fall, 2016	, , ,	
Suspension at Anoka semester only Appealing/Re-appea	a-Ramsey Community Coll- aling Financial Aid only f	or Spring, 2017	January 13 th , by 4:00 p.m.	
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Students: if you have cited medical or mental health issues as reason for a petition or appeal, it is necessary to provide a statement from your medical/mental health provider supporting your extenuating circumstances. It is not necessary to supply medical records.

Medical Providers: please submit this completed form directly to: Fax #: 763-433-1321 or email to: suspension@anokaramsev.edu

	MEDICAL VERI	FICATION F	ORM		
Address	Student Name	Last	First	Middle	
Provider: The student above is requesting supporting documentation for extenuating circumstances that have impacted their academic performance. Medical/psychological condition (please provide a brief description) (Medical records are not required.) Dates seen by the provider: 1. In your professional opinion would the condition for which you have treated the patient prevent a student from attending classes in a College setting?					
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Provider Name:					
	Provider Name:				
Contact Information: (attach business card to form)	Contact Information	: (attach business card	to form)		
I verify that the above information is true and correct:	I verify that the above	e information is t	true and correct:		
Provider Signature:Date:	Provider Signature:_			Date:	

Established: 09/09/16