

## **COUNSELING DEPARTMENT**

## **Dismissal Appeal Form**

Deadline: Wednesday, July 3, 2019, 7:00pm (for Fall 2019)

(Please type or print legibly)

**Counselor Initials:** 

La	st name		First Name	Middle
Student ID	Number:		Contact Pho	ne:
Mt. SAC Er	nail:		@student.mtsac.edu	
•		-	ESS (formerly Disabled Studer CCESS counselors? (optional)	nt Programs and Services-DSPS), would you
[]	Yes	[ ] No	[] I do not receive servi	ces through ACCESS
Education	al Goal	(Check all that app	bly):	
Major:			[] Certifi	icate [] Associate [] Transfer
Required I	Materia	Is to Appeal:	: (Please initial by each item)	
✓	Stude		(Must be typed): Explain your ex	xtenuating circumstances (e.g., illness, family clude details and timelines regarding these
✓eme circ disr	<b>Stude</b> ergency) umstance <b>nissal</b> . E	nt Statement of and how it con s for each tern xplain the posi	(Must be typed): Explain your ex ntributed to your dismissal. In <b>n that you were on probation</b>	clude details and timelines regarding these and continued probation leading to your made and/or plan to make to ensure you
<ul> <li>✓</li> <li>emecirc</li> <li>disr</li> <li>acad</li> </ul>	Stude ergency) umstance nissal. E demic suc	nt Statement of and how it con s for each tern xplain the posi ccess (e.g., see a AC Unofficial	(Must be typed): Explain your ex ntributed to your dismissal. In <b>n that you were on probation</b> tive changes you have already counselor, seek tutoring, reduce	clude details and timelines regarding these and continued probation leading to your made and/or plan to make to ensure you
<ul> <li>✓eme</li> <li>circ</li> <li>disr</li> <li>acao</li> <li>✓</li> <li>✓</li> <li>✓</li> <li>✓</li> <li>✓</li> <li>you</li> <li>doc</li> <li>doc</li> </ul>	Stude ergency) umstance nissal. E demic suc Mt. S vice #18 Supp ur statem umentat	nt Statement of and how it con s for each term xplain the posi cess (e.g., see a AC Unofficial ). orting Docum ent. This infor ion must have ion to this appo	(Must be typed): Explain your ex ntributed to your dismissal. In <b>n that you were on probation</b> tive changes you have already counselor, seek tutoring, reduce <b>I Transcript</b> : Located in the S <b>nentation</b> : Please include doc rmation will be used to deter your name, ID number, and	clude details and timelines regarding these and continued probation leading to your made and/or plan to make to ensure you work hours, etc.).
<ul> <li>✓emecirc</li> <li>disr</li> <li>acad</li> <li>✓</li> <li>✓&lt;</li></ul>	Stude ergency) umstance nissal. E demic suc Mt. S vice #18 Supp ur statem umentati fidential	nt Statement of and how it con s for each term xplain the posi ccess (e.g., see a AC Unofficial ). orting Docum ent. This infor ion must have ion to this appo	(Must be typed): Explain your ex ntributed to your dismissal. In <b>n that you were on probation</b> tive changes you have already counselor, seek tutoring, reduce <b>I Transcript</b> : Located in the S <b>nentation</b> : Please include door rmation will be used to deter your name, ID number, and eal because it will not be return	clude details and timelines regarding these and continued probation leading to your made and/or plan to make to ensure you work hours, etc.). Student Tab of your portal (Student Self- cuments that provide evidence to suppor mine the appeal decision. All supporting signature. Please do not attach origina
<ul> <li>✓emecirc</li> <li>disr</li> <li>acad</li> <li>✓</li> <li>✓&lt;</li></ul>	Stude ergency) umstance nissal. E demic suc Mt. S vice #18 Supp ur statem umentati fidential	nt Statement of and how it consistent s for each term xplain the posi- iccess (e.g., see a AC Unofficial ). orting Docum- ent. This infor- tion must have ion to this appo-	(Must be typed): Explain your ex ntributed to your dismissal. In <b>n that you were on probation</b> tive changes you have already counselor, seek tutoring, reduce <b>I Transcript</b> : Located in the S <b>nentation</b> : Please include doc rmation will be used to deter your name, ID number, and eal because it will not be return Date	clude details and timelines regarding these and continued probation leading to your made and/or plan to make to ensure you work hours, etc.). Student Tab of your portal (Student Self- cuments that provide evidence to suppor mine the appeal decision. All supporting signature. Please do not attach origina rned to you. All information submitted is

DAttended Reinstatement Workshop □Cleared in Banner □Comment in SPACMNT □Comment in SARS



## COUNSELING DEPARTMENT Dismissal Appeal Form

Deadline: Wednesday, July 3, 2019, 7:00pm (for Fall 2019)

(Please type or print legibly)

- Your appeal will not be reviewed if any of the required materials are missing.
- You will be notified of the appeal decision via email after 3pm on Tuesday, July 9, 2019.
- If your appeal is approved, you <u>MUST</u> attend a Reinstatement Workshop. You cannot register for classes until you attend the workshop. Please call or visit the Counselor Center to schedule the Reinstatement Workshop.

Mt. SAC Counseling Center Student Services Center, 2<sup>nd</sup> Floor, Bldg. 9B (909) 274-5680