SCHOLASTIC APPEALS PETITION
IDAHO STATE UNIVERSITY

This petition is only to be used after a student has met with the instructor in an effort to resolve the issues in question, presented any unresolved issues to the Department Chairperson, and had a formal hearing before the Dean of the College involved.

A complete description of the Scholastic Appeals process can be found in the ISU Student Handbook (www.isu.edu/studenta/handbook.pdf).

Student Name___________________________________________________________

Student ID Number_____________________________________________________

Telephone Number(s)____________________________________________________

E-mail______________________________________________________________

Name and Number of Course Being Appealed_______________________________

Semester and Year Course was Taken______________________________________

Instructor Name________________________________________________________

Concise description of the complaint:

Student Signature_______________________________________________________ Date________________

1. Attach copies of all written charges, answers, and arguments and all tangible evidence presented at the Dean’s formal hearing;
2. Obtain comments and signatures from the faculty member, department chairperson, and Dean of the College;
3. Return this form to the Office of the Vice President for Student Affairs
Faculty Member comments:

Faculty signature

Date

Department Chairperson comments:

Department Chairperson signature

Date

Dean of the College comments:

Dean of the College signature

Date
CONSIDERATION OF APPEAL BY SCHOLASTIC APPEALS BOARD

The Scholastic Appeals Board reviewed this petition on (date)__________________________ and voted to:

☐ Grant a formal hearing.  
   The date for the formal hearing will be at least two weeks from official notice given to the involved persons.

OR

☐ Denied a formal hearing.  
   If this occurs, the student's petition is denied. There is no further appeal.

Date set for final hearing, if any________________________________________________________

Date by which official notice must be given to involved parties__________________________

_______________________________________________________________

FINAL HEARING OF SCHOLASTIC APPEALS BOARD

Date of final hearing______________________________________________________________

Final decision of Scholastic Appeals Board:

_______________________________________________________________

Signature of Scholastic Appeals Board Chairperson_____________________________________

Please attach signed statements of confidentiality by all members of the Scholastic Appeals Board, and forward this petition to the Office of the Vice President for Student Affairs.