Prerequisite/ Corequisite/ Placement Appeal
Valid until grade earned

Appeal Procedure:
1. **Explore** alternatives with a counselor.

2. **Submit** completed appeal form and required supporting documentation to the Office of the Dean, Student Services/ Counseling and Matriculation, Building A, by the scheduled deadline. Refer to the counseling website under “Important Dates”. You may request provisional admission into the course, pending the outcome of the appeal. If the appeal is denied, you will be administratively dropped from the course.

3. **Notification:** Students will be notified of the status of their appeal via their AHC email account only. The appeal review process takes up to 5 working days.

Last Name          First Name      Student ID#  Date Submitted

@my.hancockcollege.edu

AHC Email Account

PREREQUISITE/ COREQUISITE/ PLACEMENT INFORMATION:

Course/Placement I wish to challenge  Course I wish to enter  Semester/Year

Students have the right to appeal a Prerequisite/ Corequisite/ Placement based on the following grounds. Check the box that applies to you.

- [x] I have documented knowledge and abilities to succeed in the course despite not meeting the prerequisite/placement (documentation required: e.g. transcript, verification of equivalent experience, writing sample for appeal of an English course).
- [ ] The prerequisite course has not been made reasonably available.
- [ ] The prerequisite is discriminatory or is being applied in a discriminatory manner (documentation required).
- [ ] Other (Specify): ______________________________________________________________________________

In the space below, provide information that you believe makes you eligible to take the desired course without meeting the requirement. Be sure to attach any supporting documentation to support your appeal.

Student Statement: ________________________________________________________________

________________________________________________________________________________

________________________________________________________________________________

________________________________________________________________________________

I acknowledge that Allan Hancock College has determined that the prerequisite/corequisite/placement in question is necessary for my educational success. If this appeal is approved, I am taking personal responsibility for succeeding.

Student Signature

Nondiscrimination Statement: The Allan Hancock Joint Community College District is committed to the active promotion of diversity and equal access and opportunities to all staff, students, and applicants, including qualified members of underrepresented/protected groups. The college assures that no person shall be discriminated against regardless of race, color, ancestry, religion, gender, national origin, age, physical/mental disability, medical condition, status as a Vietnam-era veteran, marital status, or sexual orientation.

Revised: 1/25/2013
Student Name _____________________________________  Student ID #: H ____________

Counselor Recommendation

☐ Recommended  ☐ Not Recommended

Comments: ____________________________________________
_____________________________________________________
_____________________________________________________
_____________________________________________________
_____________________________________________________
_____________________________________________________

Counselor Signature ___________________________ Date ____________

Chair, Academic Department Recommendation

☐ Recommended  ☐ Not Recommended

Comments: ____________________________________________
_____________________________________________________
_____________________________________________________
_____________________________________________________
_____________________________________________________
_____________________________________________________

Chair, Academic Department’s Signature ________________ Date ____________

Dean of Student Services/Counseling and Matriculation Decision

☐ Approved  ☐ Denied

Comments: ____________________________________________
_____________________________________________________
_____________________________________________________
_____________________________________________________
_____________________________________________________
_____________________________________________________

Dean, Student Services/ Counseling and Matriculation Signature ________________ Date ____________

Provisional Granted _______  Administrative Drop _______  Student Notification _______

Date               Date               Date