

University of Toronto Mississauga  
ACADEMIC APPEALS SUBCOMMITTEE FORM



UNIVERSITY OF  
**TORONTO**  
MISSISSAUGA

**PURPOSE:** To appeal decisions of **Committee On Standing** on student appeals.

**PROCESS:** Submit this form **within 90 days** of the date of the Committee on Standing's decision via e-mail to Rachel Gorjup, Academic Appeals & Integrity Coordinator at [academicappeals.utm@utoronto.ca](mailto:academicappeals.utm@utoronto.ca).

**FORMAT OF HEARING:** The Academic Appeals Subcommittee hearing panel consists of no more than seven teaching staff members, and at least one undergraduate student representative. Once you have submitted your appeal, you will be contacted to schedule your appearance in front of the Subcommittee panel and will be required to present your case in person at a meeting convened to hear your case. Questions about this process may be directed to Rachel Gorjup, Academic Appeals & Integrity Coordinator at [academicappeals.utm@utoronto.ca](mailto:academicappeals.utm@utoronto.ca).

**AT THE MEETING:** It is your responsibility to convince the Subcommittee that due to circumstances beyond your control you should be exempt from an academic regulation that applies to all students. It is vital that you provide appropriate documentation that supports the reasons behind your appeal.

**PRINT CLEARLY:**

Student name: \_\_\_\_\_

Given/First Name

Family/Last Name

Mailing address: \_\_\_\_\_

City: \_\_\_\_\_ Province: \_\_\_\_\_ Postal code: \_\_\_\_\_

E-mail address: \_\_\_\_\_

Phone number: \_\_\_\_\_ Student number: \_\_\_\_\_

**Type of Appeal:**

┆ Late withdrawal from \_\_\_\_\_ (full course code) \_\_\_\_\_ (session)

┆ Suspension Lift:  One Year  Three-Year

┆ Early Return from a Three-Year Suspension

┆ Extension of time for \_\_\_\_\_ (full course code) \_\_\_\_\_ (session)

┆ Deferral of Unwritten Final Exam for \_\_\_\_\_ (full course code) \_\_\_\_\_ (session)

**Note:** \$70 fee if granted

┆ Exception to degree / distribution requirement: Specify \_\_\_\_\_

┆ Other: Specify \_\_\_\_\_

**Additional Documentation to support the appeal:**

I will submit additional documentation to support my case (via e-mail at [academicappeals.utm@utoronto.ca](mailto:academicappeals.utm@utoronto.ca) ) and bring original copies to the meeting.

My file is complete and I do not wish to submit additional documentation.

**Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

The University of Toronto respects your privacy. The information on this form and any personal health information that you provide as part of the academic appeals process is collected pursuant to section 2(14) of the University of Toronto Act, 1971. It is collected for the purpose of administering the petitions and academic appeals process through the Academic Appeals Subcommittee, and for the purpose of statistical reporting to government agencies. Please note that this information will be distributed to members of the Subcommittees in order for them to be able to arrive at a decision on your appeal. At all times it will be protected in accordance with the Freedom of Information and Protection of Privacy Act. If you have questions, please refer to [www.utoronto.ca/privacy](http://www.utoronto.ca/privacy) or contact the University Freedom of Information and Protection of Privacy Office at 416-946-7303, McMurrich Building, room 201, 12 Queen's Park Crescent West, Toronto, ON, M5S 1A8."