

Accommodations Appeals Petition

(To be filled out by student)

Name: _____

SSN: _____

Semester: _____ Class: _____

Section # _____

Instructor's Name: _____

Accommodations requested:

Reason(s) for accommodations:

Accommodations denied:

Reason for denial:

Appendix A (continued)

Request for Academic Accommodations Panel Hearing

I hereby request an Accommodations Panel Hearing.

Signature of Student: _____

Date: _____

Academic Accommodations Panel's Recommendation:

Name

Title

Name

Title

Name

Title

Name

Title

Name

Title

Name

Title

Name

Title

Name

Title