



LIAISON
COLLEGE

Student Petition for Appeal

Please fill out this form completely.

Date:

Student:

Mailing Address:

Student No.:

City:

Telephone:

Province:

E-mail Address:

Postal Code:

Course:

Instructor:

Please explain the reason for your appeal and any documentation in support of your appeal, such as doctor's certificates. The College will review the Student Petition for Appeal and respond in writing, usually within one month.

Please list all supporting documents attached to this Petition to Appeal.

