



Student Request for EXCEPTION TO ACADEMIC POLICY PROFESSIONAL STUDIES PROGRAM

Center for Professional Studies •Keuka College •Keuka Park, NY 14478 •Phone:866-255-3852 •Fax:315-279-5407 Student may appeal a denial to the Instruction Committee through the Committee Chair.

Student Name Cohort Number and Major Location

On a separate piece of paper clearly articulate the policy you are requesting and exception to and the rationale of your request for Exception to Academic Policy. Please include any additional documentation required for review.

Please indicate the total number of pages submitted for review:

Student Signature: Date:

STUDENT DO NOT WRITE BELOW THIS LINE

Program Representative Position:

I approve I do not approve

Signature Date

Relevant Role/Title:

Rationale:

Director of Administration Position:

I approve I do not approve

Director of Administration Signature (required) Date

Rationale:

DECISION: Granted Denied

Assoc. Vice President for Professional Studies (required) Date

Reason(s) for Denial:

Fee to be charged associated with this request: None/Denied \$250.00 Waived (required AVP initials)

Registrar's Signature Date

Distribution: Student, CPS, Registrar's Office, Instruction Committee Chair