## Bachelor of Health Sciences (Honours) Program APPEAL TO ASSOCIATE DIRECTOR (STUDIES)

## Bachelor of Health Sciences (Honours) Program Office

bhsc@queensu.ca

613-533-2566 Botterell Hall, Room 815 18 Stuart Street Kingston, ON K7L 3N6

	Kingston, ON K7L 3N6
Name:	Level of Study:
Student #:	Learning Track:
Email:	(if applicable)
	On applies to all appeals. Please contact the Bachelor of Health Sciences (Honours) instruction on administrative fee payments.
☐ I want to appeal the decision	n of the instructor.
I will be appealing the:	
To add a course after the last	official date for adding courses (see Academic Calendar Dates);
$\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ $	official date for dropping courses (see Academic Calendar Dates);
To request Aegrotat standing	in a course (see Academic Regulation 10);
☐ To request Credit (CR) standir	g in a course (see Academic Regulation 10);
$\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ $	deadline to complete a deferred exam in a course (see Academic Regulation 10);
$\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ $	deadline to submit incomplete work in a course(see Academic Regulation 10);
Instructors' decisions on grad	ng term work (see Academic Regulation 11);
Instructors' decisions on grad	ng final examinations (see Academic Regulation 11);
To request to write the final e	amination for an online course at an earlier time than formally scheduled (see
A requirement to withdraw (s	e Academic Regulation 13).
	Appeal to the Associate Director (Studies)
decision that is being appealed. An app explain the extenuating circumstances a appended to the appeal. You are stron	or of Health Sciences (Honours) Program Office within 21 calendar days of the in all fee must also be submitted with the appeal documents. The student must cled their impact upon the student. The appropriate supporting documentation must ly encouraged to contact the Office of the Ombudsperson for advice on matter tive. (phone: 1-613-533-6495; e-mail: <a href="mailto:ombuds@queensu.ca">ombuds@queensu.ca</a> ).
Signature:	Date:
FOR OFFICE USE ONLY Date Submitted:	
Date Submitted:  Date Documents Supplied:	
Payment Received:	

The personal information collected on this form is collected under the legal authority of the Royal Charter of 1841, as amended. The information collected will be used to make a decision regarding your appeal and to provide a response. This information will be retained for a minimum of five years in accordance with the Queen's Records Management Policy, 2003. If you have any questions or concerns about the information collected or how it will be used, please contact the *Bachelor of Health Sciences (Honours)* Program Office at <a href="mailto:bhsc@queensu.ca">bhsc@queensu.ca</a>.