

AA211, Heritage Hall 1301 - 16 Avenue NW Calgary, AB T2M 0L4 Phone: 403.284.7248 Toll-free: 1.877.284.7248 Fax: 403.284.7112

Email: inquiry@sait.ca

Please complete sections A to C digitally. Submit to the Office of the Registrar via email to inquiry@sait.ca within 10 calendar days of receiving notice.

	A) Personal Information								
Address City				Student ID Number					
Address City	Last Namo			First Name			Middle Name		
Preferred Number Home Golder Gold	Last Name			FIIST Name		Middle Name			
Email Address Email	Address			City			Province		
Email Address Email			I a company						
Email Address B) Program/Subject Information Program/Course Major/Option Dates Attended (DD-mmm-YYYY) to to	Preferred Number	Cellular	Alternate Numbe	r	[Cellular	Postal Code		
Program/Course Major/Option Dates Attended (DD-mmm-YYYY) to I request to appeal my standing of Academic Withdrawal (Policy Reference AC.3.1) Agreement *This is my first appeal for Academic Continuance	Email Address	Business			L	Business			
Program/Course Major/Option Dates Attended (DD-mmm-YYYY) to I request to appeal my standing of Academic Withdrawal (Policy Reference AC.3.1) Agreement *This is my first appeal for Academic Continuance									
I request to appeal my standing of Academic Withdrawal (Policy Reference AC.3.1) Agreement *This is my first appeal for Academic Continuance	B) Program/Subject Information								
I request to appeal my standing of Academic Withdrawal (Policy Reference AC.3.1) Agreement *This is my first appeal for Academic Continuance	Program/Course			Major/Option Dates Atter		tended (DD-mn	ended (DD-mmm-YYYY)		
*This is my first appeal for Academic Continuance							to		
*This is my first appeal for Academic Continuance		Policy Refer	ence AC.3.1)						
*This application is within 10 calendar days of notification of Withdrawal								Vas	No
GPA is above 1.0 with current unofficial transcript included									
Proof of Completion of Back on Track is included									
A written letter of recommendation from a faculty member, Academic Chair, or an advisor from my program is included									
Supporting documents such as doctor's notes, death certificates, legal documents or official letters, etc. are included									No
Reason for appeal (highlight):	A written letter of recommendation from a faculty member, Academic Chair, or an advisor from my program is included						. Yes	No	
	Supporting documents such as doctor's notes, death certificates, legal documents or official letters, etc. are included							. Yes	No
Describe the extenuating circumstances under which you'd like special consideration for appeal:									
	Describe the extenuating circumstances under which you	'd like spe	cial consideration	n for appeal:					



AA211, Heritage Hall 1301 - 16 Avenue NW Calgary, AB T2M 0L4 Phone: 403.284.7248 Toll-free: 1.877.284.7248 Fax: 403.284.7112

Email: inquiry@sait.ca

Please complete sections A to C digitally. Submit to the Office of the Registrar via email to inquiry@sait.ca within 10 calendar days of receiving notice.

If granted continuance, what is your plan for success? Please be specific and include resources you will access and other changes yo	u intend to make:				
	1.0.1./00				
Student Signature	Date (DD-mmm-YYYY)				
C) Payment Information					
Fee: \$100					
This fee will cover the cost of reviewing an appeal request to continue your studies or reduce the waiting period after a first or subsequent academic withdrawal. This fee can be refunded only if the appeal to continue your classes with no waiting period is successful.					
This fee will be added to your mySAIT.ca account after your request is processed. You will have two business days to make your payment through mySAIT Failure to pay will result in the request being cancelled. We are unable to accept payments in person, over the phone or by email. Review payment options methods. Do not include your credit card information in the email to records@sait.ca.	T.ca or one of our approved online payment options. is at <u>SAIT.ca</u> to find our acceptable online payment				

FOIP Notification

The personal information you provide on this form is collected under the authority of the Freedom of Information and Protection of Privacy Act of the Province of Alberta, Section 33(c). This information will be used to process a request for a third attempt of a course. If you have any questions about the collection or use of this information, contact the FOIP Coordinator at foip.coordinator@sait.ca.