

Required to Withdraw Appeal Form

Required Information

Student Name:	Student ID#		
Address including Postal Code:			
Phone Number:			
Program of Study:			
What is the passing grade for your courses?			
What is the minimum overall GPA for your program to remai	n in good standin	g?	
Is this your first Required to Withdraw appeal? Yes	No		
What semester do you wish to return?			
Complete the following steps to submit your appeal request	:		
 Complete the guided appeal form outlining why your G to ensure your academic success, if re-admitted to you 		and outline a detailed plan that y	ou will follow
 Schedule a virtual appointment to meet with the Acade <u>Academic.Success@keyano.ca</u>. 	mic Success Coach	n to review academic plan,	
3. Schedule a virtual appointment with your Program Cha	ir to review academ	ic plan.	
4. Email your completed package to the Office of the Reg	istrar. <u>Registrar@k</u>	eyano.ca	
Student Signature	Da	te:	
Office Use Only – Required Signatures			
Academic Success Coach:	DATE:	Completed	
Program Chairperson:	DATE:	Recommend Approval	Recommend Denial
Registrar:	DATE:	Approved	Denied

The personal information requested on this form is collected under the authority of Section 33 (c of Alberta Freedom of Information and Protection of Privacy Act for the purpose of registering students, contacting students and tracking enrolment statistics. Questions concerning the collection, use or disposal of this information should be directed to:

Keyano College Office of the Registrar | 8115 Franklin Avenue, Fort McMurray AB T9H 2H7 Toll Free 1.800.251.1408 | Telephone 780.791.4801 | E-Mail registrar@keyano.ca www.keyano.ca/forms

RTW Appeal

- 1. Please describe the barriers you faced last semester that led to your low course grades. What actions on your part (e.g. poor class attendance, procrastination, etc.) contributed?
 - a. Please describe the barriers you faced last semester:

b. What actions on your part contributed to your low course grades?

- 2. What steps did you take last semester to improve your academic performance?
- a.
- b.

3. Please describe how you are planning to improve your academic performance in the next semester (if your RTW Appeal is successful). Please include resources you are going to access and strategies you will be using.

Goal	Actions	Resources
Example: Improve Health	Go to the gym 3 times a week	Access personal trainer
Goal 1		
Goal 2		
Goal 3		
GOAL3		
Goal 4		

4. Using the chart above as a guide, create three goals you would like to accomplish during the next semester. Be specific and make the goals attainable.

Example: I will go to the gym to walk the track at the Syncrude Sports and Wellness Centre after my last class of the day, three times a week by December 1, 2020.

Note: when writing your goals, tell us exactly what you will do in detail, by when (date).

Goal 1: I will (goal)

By (set a specific date)

Goal 2: I will (goal)

By (set a specific date)

Goal 3: I will (goal)

By (set a specific date)

5. List at least 2 individuals that will be able to support you in reaching your academic goals during the next semester. Examples may include your instructor, the Librarian, a fellow student, a parent, a spouse, etc.

а.

b.

Is there any additional information that you would like to share with us in regard to your appeal?