

FOCUS COLLEGE – STUDENT APPEAL FORM**Form Number: 6009***(Applicable to All Appeals under Appeals Policy No. 2001)***SECTION 1: STUDENT INFORMATION**

1.1 Student Full Name: _____

1.2 Student ID Number: _____

1.3 Program of Study: _____

1.4 Campus Location (if applicable):

☐ Surrey ☐ Kelowna ☐ Abbotsford ☐ Other: _____

1.5 Email Address: _____

1.6 Phone Number: _____

SECTION 2: TYPE OF APPEALPlease indicate the **primary category** of your appeal (select **one**):

- ☐ a. Grade / Academic Assessment
- ☐ b. Academic Integrity and AI Misuse
- ☐ c. Disciplinary or Misconduct Decision
- ☐ d. Suspension or Dismissal
- ☐ e. Withdrawal or Refund Determination
- ☐ f. Leave of Absence (LOA) Decision
- ☐ g. Dispute Resolution

Designated Learning
Institution Number
019330446102

📍 **Surrey:** 13710 94A Ave, Surrey, BC, Canada
📍 **Kelowna:** 1753 Dolphin Ave, Kelowna, BC, Canada
📍 **Abbotsford:** 306 – 2777 Gladwin Rd, Abbotsford, BC, Canada

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- ☐ h. Institution or Program Transfer Decision
- ☐ i. Other (please specify): _____

SECTION 3: DECISION BEING APPEALED

3.1 Description of the Decision Being Appealed
(Include date of decision and reference documents if available)

3.2 Date You Received the Decision: ____ / ____ / ____

SECTION 4: GROUNDS FOR APPEAL

Indicate the grounds for your appeal (check all that apply):

- ☐ a. Procedural error
- ☐ b. Unfair treatment
- ☐ c. New or additional evidence not previously considered
- ☐ d. Misapplication or misinterpretation of policy
- ☐ e. Other (please specify): _____

SECTION 5: APPEAL STATEMENT

5.1 Please clearly explain why you are appealing the decision, referencing facts, timelines, and policies where possible.



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(Attach additional pages if required.)

SECTION 6: PRIOR RESOLUTION ATTEMPTS (IF APPLICABLE)

6.1 Have you attempted to resolve this matter informally or through an earlier stage?

☐ Yes ☐ No ☐ Not Applicable

6.2 If yes, briefly describe the steps taken and outcomes:

SECTION 7: SUPPORTING DOCUMENTATION

7.1 Supporting documents attached (check all that apply):

- ☐ a. Email correspondence
- ☐ b. Medical or compassionate documentation
- ☐ c. Academic records or assessments
- ☐ d. Decision letter being appealed
- ☐ e. Witness statements
- ☐ f. Other supporting evidence (please list): _____

SECTION 8: REPRESENTATION (IF APPLICABLE)

8.1 Will you be accompanied or represented during the appeal process?

☐ Yes ☐ No

8.2 If yes, indicate representative type:

- ☐ a. Fellow student
- ☐ b. Family/Friend support person



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☐ c. Agent

☐ d. Legal representative

8.3 Representative Name (if applicable): _____

SECTION 9: STUDENT DECLARATION

I confirm that:

a. The information provided in this appeal is accurate and complete to the best of my knowledge.

b. I understand that this appeal will be reviewed in accordance with Appeals Policy No. AP 2001.

c. I understand that submission deadlines apply and that decisions issued at the final stage are binding.

Student Signature: _____

Date: ____ / ____ / ____

SECTION 10: OFFICIAL USE ONLY (FOCUS COLLEGE)

10.1 Date Appeal Received: ____ / ____ / ____

10.2 Appeal Type Confirmed: _____

10.3 Reviewing Authority:

☐ Vice President, Academics

☐ Academic Review Panel

☐ Academic Affairs Committee

☐ President / CEO

☐ Other: _____

10.4 Outcome:

☐ Appeal Upheld



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- ☐ Appeal Denied
☐ Appeal Partially Upheld
☐ Additional Review Required

10.5 Decision Date: ____ / ____ / ____

10.6 Decision Communicated to Student:

☐ Email ☐ Letter ☐ Other: _____



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