



Date Received: \_\_\_\_\_

# College Now! Appeal

Valid only for requested semester/term

If you believe that the matriculation procedure or service is being applied in a discriminatory manner, an appeal may be filed. On the second page of this form, please write a descriptive statement explaining the reason for your appeal. Attach a copy of your high school transcript and AHC transcript (if applicable) and any pertinent documentation to support your request as to why you wish to take a course(s) at AHC. A letter of recommendation from a high school administrator or high school counselor is highly recommended.

**Procedure:**

1. **Complete** the appeal.
2. **Submit** completed form to the office of the Dean, Student Services by the scheduled deadline. Refer to the counseling website under "Important Dates".
3. **Notification:** Students will be notified via student e-mail of the decision by the office of the Dean, Student Services. The review process takes up to 5 working days.
4. **If approved**, you will be cleared to enroll.

**TO BE COMPLETED BY THE STUDENT, please print clearly using black or dark blue ink:**

\_\_\_\_\_  
Full Name

\_\_\_\_\_  
Student Signature & current date

H  
\_\_\_\_\_  
Allan Hancock College Student ID Number

\_\_\_\_\_  
10 digit phone number

\_\_\_\_\_  
Personal E-mail Account

**Appeal requested:** Check the option(s) that applies to you.

\*If approved, College Now students may take a maximum of 6 units per semester. If a course requires an English or math placement, you are required to take the START assessment in our Testing Center.

\_\_\_\_\_ Freshman/Sophomore Eligibility

\_\_\_\_\_ High School not in allowable county

\_\_\_\_\_ Grade Point Average (GPA)

\_\_\_\_\_ Excess Units: If approved, how many units \_\_\_\_\_

**If approved for 12 or more units, YOU are responsible to pay all fees.**

**List ALL requested courses in the semester in which you wish to enroll:**

\_\_\_\_\_  
Course Name (i.e. ENGL 101)      \_\_\_\_\_  
Units

\_\_\_\_\_  
Course Name (i.e. ENGL 101)      \_\_\_\_\_  
Units

\_\_\_\_\_  
Course Name (i.e. ENGL 101)      \_\_\_\_\_  
Units

\_\_\_\_\_  
Course Name (i.e. ENGL 101)      \_\_\_\_\_  
Units

**Signatures Required:**

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
High School Administrator Signature

\_\_\_\_\_  
Date

**Continue onto the second page**

Student Name: \_\_\_\_\_

Student ID#: H \_\_\_\_\_

**Write a detailed statement explaining why it is important to approve this appeal. *Do not leave blank.***

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**-- TO BE COMPLETED BY THE DEAN OF STUDENT SERVICES**

**Approved**

**Denied**

Comments:

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\_\_\_\_\_  
Signature, Dean of Student Services or designee

\_\_\_\_\_  
Date

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**FOR OFFICE USE ONLY:**

Notification: \_\_\_\_\_  
Date

\_\_\_\_\_  
Initials

Appeal Entered: \_\_\_\_\_  
Date

\_\_\_\_\_  
Initials