

SPECIAL APPEAL PROCESS

INSTRUCTIONS:

A Special Appeal is a written appeal for a financial refund and/or cancel registration submitted by the student when, under certain circumstances, he/she registers for a class, and extenuating circumstances prevent the student from attending class. An appeal must be submitted with all necessary documentation supporting the student's statement. Please note, a **Special Appeal is not a Grade Appeal nor a Satisfactory Academic Progress (SAP) appeal**. The Special Appeal form can be found and downloaded from the UCNJ website at www.ucc.edu, Owl's Nest under the Dean of Students page, or in the Student Services Center located on each campus. **PLEASE READ ALL INSTRUCTION ON THIS PAGE!**

PROCESS FOR SUBMITTING SPECIAL APPEALS:

1. Make sure you are within the deadline for submitting an appeal:
 - A) **WINTER AND SPRING APPEALS** must be submitted by November 1 of that calendar year.
 - B) **SUMMER APPEALS** must be submitted by November 1 of that calendar year.
 - C) **FALL APPEALS** must be submitted by November 1 of the following calendar year (ex: if your request is from fall 2022, student has until November 1st, 2023, to submit a Special Appeal request).
2. Submit a typed explanation letter (*see sample letter*).
3. Supporting documentation **MUST** be attached (*medical documentation, death certificate, birth certificate, military service letter, airplane tickets, doctor notes, legal process documentation including civil or criminal cases where you have been involved, subpoena, etc.*).
4. An official decision letter will be sent to the address you indicate in the Special Appeal Form.

TIMEFRAME FOR DECISIONS:

The Special Appeal process could take more than 30 days due to the significant number of requests and the timeframe during the academic year in which a decision could be rendered. Also, missing documents or lack of explanation in the Special Appeal letter could delay the committee's decision. Knowledge of College policies and procedures are the responsibility of the student. Therefore, appeals submitted based on lack of knowledge of college policies and procedures may not be considered.

* If you have more questions please contact the Administrative Assistant to the Dean of Students, in the office of the Dean of Students: Email: specialappeals@ucc.edu Phone 908-709-7139

SAMPLE LETTER

DIRECTIONS: This is how you should structure your Special Appeal letter. Please make the letter concise and as long as you need in order to explain your extenuating circumstances. You can use more than one page. Do not forget to sign it.
Please do not fill-in the blanks; compose a letter using this as a template.

Date:

Your Name:

Student ID#:

Complete Address:

UCNJ Union College of Union County, NJ
Dean of Students Office
1033 Springfield Avenue
Cranford, NJ 07016

Re: Special Appeal Request

Members of the Special Appeals Committee:

I am submitting a Special Appeal request due to (**medical, bereavement, other**) reasons for the _____
(**semester and year**).

During the _____ (example Fall 2022) semester (**Explain your extenuating circumstances, please include all details, dates, and other important information**).

Also, with this request you will find my supporting documentation which includes: (**List of the paperwork submitted**).

Finally, I would like to request (**explain your request: Waive my balance, a full refund, or a credit**).

Thank you for your assistance with this matter.

Sincerely,

Student's signature

(Type your name below your signature)

SPECIAL APPEAL FORM

Please Print Legibly or Type

1. **Make sure you are within the deadline for submitting a special appeal** (see instructions). *Appeals will be reviewed if submitted within the timeframe noted above.*
2. **Refer to the UCNJ Catalog to understand College policies and procedures.**
 - Knowledge of College policies and procedures is the responsibility of the student.
Therefore, appeals submitted on the basis of lack of knowledge of college policies and procedures will not be considered.
 - Appeals must be submitted on this form, signed by the student, dated with an explanation letter (please include specific facts and request) and supporting documentation that substantiates claims made in the appeal.
3. **Check off your reason for submitting an appeal.**
☐ Medical ☐ Bereavement ☐ Other
 - **GRADE APPEALS** must be submitted to the instructor or Academic Dean on a separate form.
Please visit the Division Office for the appropriate form.
 - **SAP APPEALS** must be submitted in Financial Aid office
4. **Attach a typed an explanation letter and reason for your appeal.** Provide supporting documentation for ALL appeals.
5. **Student Information:**
First name _____ Last Name _____
Student ID # _____ Owl's Email: _____
Street Address _____
City _____ State _____ ZIP _____
Phone Number: _____
6. **Indicate the semester for your appeal:**
☐ Fall 202____ ☐ Winter 202____ ☐ Spring 202____ ☐ Summer I 202____ ☐ Summer II 202____
7. **Student signature:**

Date: _____
8. **Email or return completed signed form, letter, and supporting documentation** to specialappeals@ucc.edu or the Dean of Students Office, Cranford Campus, MacDonald Hall Suite A-135.

SPECIAL APPEAL FORM continued

STUDENT NAME _____ ID # _____

COMMITTEE USE ONLY:**SPECIAL APPEAL COMMITTEE RECOMMENDATION:**

Approved: _____ Denied: _____ Date: _____

Comment(s): _____

_____Instructions to other department(s): _____

_____**VICE PRESIDENT FOR STUDENT DEVELOPMENT:**Comment(s): _____

Approve Committee Recommendation(s): _____ Deny Committee Recommendation(s): _____

VPSD Signature: _____ Date: _____

VICE PRESIDENT FOR ACADEMIC AFFAIRS:Comment(s): _____

Approve Committee Recommendation(s): _____ Deny Committee Recommendation(s): _____

VPAA Signature: _____ Date: _____