Academic Appeals Form

Name: _______________________________ E-Number: _______________________________________

Address: ___________________________________________________________________________

Phone: _____________________________ ETSU E-mail: _______________________________________

Program: ☐ HPNU-Health Professions-Nursing Interest ☐ Traditional BSN ☐ LPN-BSN ☐ RN-BSN ☐ Accelerated 2nd degree BSN ☐ Accelerated BSN

Campus: __________________________________________

I am appealing: ☐ to be reinstated in the BSN major.
☐ to be considered in the candidate pool for admission into the BSN major
☐ to transfer to ETSU’s BSN major from another nursing program.
☐ other – specify __________________________________________

I was dismissed: ☐ because of course failures/poor academic performance.
(ETSU or another nursing program) ☐ because of non-academic reasons
Specify course(s): __________________________________________
Specify reason(s): __________________________________________

Attach a one-page business-style professional letter addressed to the Members of the Undergraduate Academic Standards Committee.

This letter must address the following issues:

- Key factors or circumstances that contributed to this appeal (i.e., illness/injury, other extenuating circumstances, reason(s) for low grades/transfer/lapses in professionalism).

- Strategies for improvement(s) the student plans to implement if the appeal is granted.

Optional: Student may request letters of support from College of Nursing faculty. These letters should be included with the appeal documents.

Please adhere to the College of Nursing (CON) professional dress code for the meeting.

☐ I request a video conferencing link to attend the meeting remotely

Office Use Only

Date Appeal Form Submitted: ____________ Time of Appointment: ____________

Committee Recommendation*: ☐ Grant Appeal ☐ Deny Appeal Date: ____________

*For a detailed summary of committee discussion, see the Faculty Recorder Documentation of Student Appeal Meeting

Dean or Dean’s designee Response: ☐ Grant Appeal ☐ Deny Appeal
Comments: __________________________________________ Date: ____________

Student Notification of Appeal Outcome

☐ Advisor Phone Call Date: ____________ Time: ____________
Comments: __________________________________________

☐ Advisor Follow-up Email: Date: ____________ Time: ____________
Advisor Signature: _______________________________________________________________________

EA email sent: by: ___________________________ Date: ____________
Academic Appeals Policies and Guidelines*

East Tennessee State University
College of Nursing

This form outlines the student’s right to appeal admission decisions, issues related to progression in the major, and academic dismissal from the program. An appeal does not ensure the student will automatically be approved to continue in the major once academically dismissed. College of Nursing progression policies are outlined in the College of Nursing Student Handbook. Additional information concerning the appeals process may be found in the undergraduate section at: https://www.etsu.edu/nursing/undergrad_nursing/handbook.php.

The Undergraduate Academic Standards Committee hears appeals in January, May, and/or August. The student must request an appeal using the Appeal Form obtained from the Office of Student Services. The completed form must be submitted to the Office of Student Services at least TWO business days before the committee meets. Specific meeting dates will be announced by the Office of Student Services via e-mail to all students during finals week. If the student is appealing because of course failure(s), documentation will be requested from the faculty of the specified course(s). Faculty may submit written documentation to the Office of Student Services and/or may appear before the committee. The student is urged to attend the appeal hearing in person or by video conference and may do so by making an appointment with the Executive Aide of the Office of Student Services. Otherwise, a College of Nursing academic advisor will represent the student using the information from the appeal form.

The student should be prepared to discuss the following:

1. The reason for the appeal;
2. Extenuating circumstances related to the denied admission or course failure(s); and
3. New strategies for success (why should the appeal be granted).

The committee’s recommendation will be based on the student’s information and plan and other information which may include faculty documentation regarding reason for course failure, number of withdrawals from nursing courses, prior academic record, prior clinical performance, adherence to core performance standards, adherence to the code of ethics, demonstration of practice standards and professional behavior, advising record, adherence to the policies and procedures in the College of Nursing Student Handbook, and the College of Nursing Progression Exam scores (if available).

The Undergraduate Academic Standards Committee makes a recommendation to the Dean or Dean’s designee. The Dean or Dean’s designee makes the final decision concerning the student’s appeal. While the appeal is pending, the recommendation/decision may not be discussed with the student. Advisors in the College of Nursing will make every effort to notify the student of the decision by phone. Each student will be notified of the decision by email to the student’s ETSU account.

*This form is not applicable if the student believes the wrong grade was assigned, and the student should refer to the University Student Handbook. Neither the Office of Student Services nor the Undergraduate Academic Standards Committee is responsible for the grade appeal process.