



DEFERRED EXAM APPEAL FORM

Deferred exam appeal packages must be submitted to the Associate Dean Academic or the Director of your School within ten (10) business days from the date of the program leader decision

Students may use this form to appeal the program leader’s decision on their deferred exam request. For more information about the appeal process, please refer to the [Academic Progression Appeals Procedure](#). All communications regarding the appeals will be sent to the email address listed on the student record at the time. It is the student’s responsibility to ensure their contact information is kept up-to-date through their MyNAIT portal.

Student Name: (Last, First)		Student ID Number:	Program:
Phone Number:		Email:	
Course Code (e.g. ECON1110)	Class section code (e.g. A01)	Instructor’s Name:	
Exam Name and Description			Scheduled Exam Date & Time

Grounds for Appeal:

A deferred exam appeal can only be filed on one or more of the following grounds. On which ground(s) would you like to submit your appeal? Please select all that apply.

Procedural error: a NAIT policy and procedure has been violated or misapplied.

New Information: relevant new information has arisen that could not have been presented earlier and the information may affect the decision being appealed.

Supporting Document

Please gather and submit all supporting documents for the appeal. Please select the supporting document that you’re submitting

A copy of the relevant NAIT policy and procedure

A copy of new documentation that you couldn’t submit before

Written communications between you and the instructor and the program leader on matters related to the appeal

Others

Detailed Explanation

On the next page, please provide a detailed explanation of the reason for your appeal. See below for some guidelines on what to include depending on the ground(s) for your appeal.

- **Procedural error:** Reference the relevant policy and procedure and explain how they were violated or misapplied..
- **New Information:** Share the new information, explain why the information could not have been presented earlier and how the new information may affect the decision.

Next steps:

- 1. Submit the completed form and any supporting documentation to the Associate Dean Academic or the Director of your School.
- 2. The Associate Dean Academic/Director will notify you of the decision within fifteen (15) business days from receipt of the appeal.

Student Signature: _____ Date: _____
MM/DD/YY

OFFICE USE ONLY:
Deferred Exam Appeal Decision:

- Denied
- Approved. Deferred Exam Timeframe: _____

Associate Dean Academic/Director's Name: _____

Associate Dean Academic/Director's Signature: _____ Date: _____
MM/DD/YY

Collection and Use of Personal Information: The personal information on this form is being collected under the mandate of the Post-Secondary Learning Act (Alberta) and the Freedom of Information and Protection of Privacy Act (Alberta), and is needed to process your request. This information is protected under the provisions of the Alberta Freedom of Information and Protection of Privacy Act. If you have any questions about the collection or use of this information, contact the Office of the Registrar 780.471.6248 or toll-free at 1.877.333.6248.