



Student Name (first, middle, last): _____

High School: _____ Star ID: _____

Student Phone: _____ Student Email: _____

REASON FOR APPEAL (select one):

- Waive Concurrent Enrollment Eligibility Requirements

I am requesting an appeal for the following course(s):

| PTCC Course Name/Number | Credits | High School Instructor Name |
|---|----------|-----------------------------|
| <i>Example: ENGL 1276 English Composition</i> | <i>4</i> | <i>Justin Case</i> |
| | | |
| | | |

Additional documentation required:

- Attach a written description of your request. State your request, reasons, and arguments for submitting appeal.
- Recommendation letter from PTCC concurrent enrollment high school teacher, or a designated high school official, for the course(s) in which you are submitting this appeal
- Copy of your HS transcripts

I understand that I do not meet eligibility requirements for the PTCC concurrent course(s) listed above. I understand that if this appeal is approved and I am granted permission to take the course(s) for college credit, the course(s) will be part of my permanent academic transcript with Pine Technical and Community College.

NOTE: *The appeal request will not be considered until all information and signatures are complete.*

Student signature: _____ Date: _____

Parent/Guardian signature: _____ Date: _____

HS Teacher/Designated HS Official signature: _____ Date: _____

Send completed form and all required documentation to Jen Rancour at jen.rancour@pine.edu or 900 Fourth Street SE, Pine City, MN 55063. Forms should be submitted 2 weeks prior to the start of the course for which you are requesting an appeal.

FOR PTCC OFFICE USE ONLY - APPEAL DECISION

- Approve Request more information Deny

School notified on (date): _____ Notified by (PTCC staff initials): _____ Scanned to Web Now: _____

Comments: _____