

STUDENT APPEAL FORM

Student Instructions:

- Prior to submitting the formal appeal form, you must try to resolve the concern as soon as possible in a non-confrontational manner with the appropriate faculty or staff member.
- Please read all pages of this form carefully and complete page two in its entirety.
- All appeals must be accompanied by supporting documentation justifying your request.
- Submit Student Appeal Form and supporting documentation to the appropriate collegewide chair through the secure, electronic Student Document Dropbox available after logging in to the myEFSC Portal. Each academic discipline is listed in the "Select Office" dropdown section of the dropbox.
- Appeals will only be accepted **within 2 years** from when you took the course for which you are appealing.
- Incomplete appeals will be returned to the student for completion.

In any appeal, the burden of persuasion lies with the student.

The Collegewide Chair will notify you in writing once a decision has been made. If not satisfied with the resolution, the student may request in writing, through the Collegewide Chair’s office, a review by the Dean. The request must be received within ten days of student notification of the resolution and must contain additional documentation that is pertinent to the appeal. The decision of the Dean is final.

If the student feels that the established procedures were violated, the student may request an administrative review by the Associate Vice President of Academic Affairs. This is NOT a re-evaluation of the incident, but a procedural review. The request for administrative review must be made in writing through the Dean's office within five days of receiving notification of the resolution. The decision of the Associate Vice President is final, except as to matters involving suspension or expulsion.

Eastern Florida State College is dedicated to providing a nondiscriminatory environment which promotes equal access, equal educational opportunity and equal employment opportunity to all persons regardless of age, race, national origin, color, ethnicity, genetic information, religion, sex, gender, sexual orientation, pregnancy, disabilities, marital status, veteran status, ancestry or political affiliation in its programs, activities, or employment.

<p style="text-align: center;">Inquiries regarding the College’s nondiscrimination policies may be directed to:</p> <p>Ms. Darla Ferguson, Chief Equity and Diversity Officer Cocoa Campus, Building 2, Room 103 1519 Clearlake Road, Cocoa, FL 32922 Phone: 321-433-7080 fergusond@easternflorida.edu</p> <p style="text-align: center;">OR</p> <p>Stephen W. Salvo Security & Title IX Compliance Coordinator Melbourne Campus, Bldg. 8, Rm. 201G 3865 North Wickham Road, Melbourne, FL 32935 Phone: 321-433-7180 Fax: 321-433-5775 Email: salvos@easternflorida.edu</p>	<p style="text-align: center;">Inquiries regarding veterans’ programs may be directed to:</p> <p style="text-align: center;">Military & Veterans Service Center Student Services Center/Administration Building 1, Room 140 3865 N. Wickham Road, Melbourne, FL 32935 Phone 321-433-7880</p> <p style="text-align: center;">OR</p> <p style="text-align: center;">Military & Veterans Service Center Ralph M. Williams Student Center, Building 11, Room 113 1519 Clearlake Road, Cocoa, FL 32922 Phone: 321-433-7880</p>
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Appeal Information

Student Name: _____ Student ID B# _____

Address: _____

City: _____ State: _____ Zip: _____

Telephone Number: _____ Student Email Address: _____@titans.easternflorida.edu

Check box if you are receiving VA benefits. Yes No

Check box if you are a Dual Enrollment student. Yes No

Check all boxes that apply:

*Issue with instructor

Instructor Name: _____

*Issue with course content and / or delivery

Course Name: _____

*Grade dispute

Late Add Schedule Adjustment Request (Student Appeal Form Late Add / Schedule Adjustment Form Required)

Late Withdrawal Request (Course Withdrawal Form Required)

Tuition Credit Request (Collegewide Tuition Credit Request Form Required)

Other: _____

*Course(s) Appealing: _____

*Instructor(s) Name: _____ Terms: _____

Provide specific information for this appeal:

Use additional pages if necessary. [Consult student handbook for additional information.](#)

- I understand that exceptions may be referred to the Student Financial Appeals Committee (SFAC). The decision of the SFAC is final.
- I understand that any debt that is not removed / reduced from my account will be due upon decision of the SFAC committee.
- I understand that if I do not complete this form, it will be returned to me causing delays or possible missed deadlines.

Student Signature: _____

Date: _____

Collegewide Chair Resolution:

Request Approved

Request Denied

Collegewide Chair _____

Date: _____

For all appeals that cannot be resolved at the instructor or Collegewide Chair level, submit this completed Student Appeal Form, with full documentation attached to the Dean for review.

Dean Resolution:

Request Approved

Request Denied

Dean Signature _____

Date: _____



REGISTRATION and FINANCIAL RESPONSIBILITY AGREEMENT

Thank you for choosing Eastern Florida State College. In addition to all Eastern Florida State College (EFSC) academic standards and policies, I hereby agree to comply with the terms and conditions specified in this Registration and Financial Responsibility Agreement in order to enroll for courses at EFSC. I also agree to abide by rules and regulations described in the EFSC Catalog and EFSC Student Handbook.

I acknowledge that any activity I conduct through EFSC indicates my agreement to the specified terms and conditions, including my agreement to be financially responsible to EFSC for payment of all tuition, fees and related costs of enrollment for classes in which I am registered whether or not I attend the class.

I understand that course(s) must be dropped before the end of the drop period in order to be eligible for a full refund. It is my responsibility to drop my classes as the college will not automatically drop them for me.

I acknowledge that if I withdraw from a course(s) after the end of the drop period, or if I am administratively withdrawn for non-attendance or other reasons, I will be responsible for repaying any applicable Bright Futures Scholarship funds, Federal Title IV financial aid funds, or any other amount due as a result of the withdrawal. Any reduction in financial aid based on nonattendance will result in a balance due to EFSC.

I understand past due student account balance will result in a financial hold, which prevents future registrations as well as other services being offered in accordance with college policy. I understand and agree that EFSC will withhold transcripts, diplomas, and other services until all outstanding balances have been satisfied in full.

I acknowledge that all outstanding obligations (along with appropriate personal information including social security number) may be referred to an outside collection agency and credit reporting bureaus.

I understand that I am responsible to reimburse EFSC the fees of any collection agency, which may be based on a percentage not to exceed 33% of the debt, including attorney fees and court costs.

In addition, I agree to allow EFSC and its agents to contact me at any cell phone number that I provide now or use in the future, using automated telephone dialing systems, artificial or pre-recorded voice or text messages, or personal calls regarding my obligation to repay my debts to EFSC.

I also authorize EFSC or its agents to contact me via my easternflorida.edu address or an email address that I provide to EFSC. I understand that others may be able to review my messages and/or emails related to my debts sent to or from EFSC including their contents, which may include information about my debt and its status.

I understand that EFSC uses Titan E-mail, a free student email system, as the official means of communication for registered students. Financial Services utilizes this system for notifications regarding student accounts. Students should maintain and check their EFSC e-mail accounts regularly.

I understand this agreement shall be construed in accordance with Florida law, and any lawsuit to collect unpaid fees may be brought in the appropriate court sitting in Brevard County, Florida, regardless of my domicile at the time of bringing such action.

I understand by signing this form, I am agreeing to all terms and conditions set forth herein above and agree to the incorporation of any other related documents. I enter into this Registration and Responsibility Agreement with full knowledge of its legal implications and without coercion and/or promises made to me by the college. I also agree and acknowledge that prior to agreeing to this Agreement, I have the right and option to discuss the terms and conditions herein with a private attorney at my sole expense.

Student Signature: _____ **Date:** _____

Student ID Number: B _____

Received by: _____ **Term:** _____