



Date: _____

River Parishes Community College General Appeal Request Form

Name: _____ DOB: _____ LOLA ID#: _____

Telephone Number: _____ E-mail address: _____

Complete Mailing Address: _____

Basis for Appeal:

- Submission date of appeal must be no later than two semesters after semester in which student is appealing.
- Clearly describe the circumstances surrounding your appeal.
- Please include all pertinent details in a chronological format and attach all relevant supporting documentation.
- The appeal may be typed or hand written.
- Please attach your statement to this form and turn it in to Student Services.
- Remember – an executive committee will make a decision based upon the information you provide.
- Once your appeal is reviewed by the Appeals Committee and a decision is made, you will be notified by email of the decision.
- The decision of the Appeals Committee is final.

Committee Decision: _____ **Approved** _____ **Denied**

Comments: _____

Student Services

Financial Aid

Registrar

Business Office

The River Parishes Community College a member of the Louisiana Community & Technical College System Accredited by the Southern Association of Colleges and Schools does not discriminate on the basis of race, color, national origin, sex, disability, or age in its programs and activities and provides equal access to the Boy Scouts and other designated youth groups. The following persons located at 925 W. Edenborne Pkwy, Gonzales, LA – 225-743-8500 have been designated to handle inquiries regarding the non-discrimination policies: