



Enrollment Priority Appeal Form

In accordance with Title 5, Section 58108, Santa Monica College will consider an appeal of the loss of enrollment priority for a given term due to (1) extenuating circumstances, or (2) where a student with a disability applied for, but did not receive reasonable accommodation in a timely manner. Extenuating circumstances are verified cases of accident, illnesses or other circumstances beyond the control of the student. SMC will also consider enrollment priority appeal requests from: (3) continuing students exceeding 90 units (excluding non-degree applicable, basic skills and ESL classes); (4) those enrolled in high unit majors (e.g., STEM, nursing) who have accumulated 70 or more degree-applicable units; and (5) from students on academic/progress probation who have shown significant academic improvement in a term, but they still remain on probation. Lastly, (5) in the event that you are a member of a Special Program that grants enrollment priority, but did not receive it, submit this petition with verification of program participation. **Students must provide relevant documentation in support of this appeal.**

**Please return this completed form to the Admissions & Records Office with the appropriate documentation.
 Appeals will be reviewed and processed by a Special Consideration Committee.**

SMC ID #:		Appeal request based on:	
Last Name:	First Name:	<input type="checkbox"/> Extenuating circumstances <input type="checkbox"/> Disability with enrollment priority-related accommodation <input type="checkbox"/> Exceed 90 degree-applicable units <input type="checkbox"/> Exceed 70 degree-applicable units; pursuing high unit major/program <input type="checkbox"/> Academic/progress improvement <input type="checkbox"/> Special Program participant who did not receive enrollment priority	
Phone:			
SMC Email:			
Degree Goal:	Major:	For Current Term/Year: <input type="checkbox"/> Summer/Fall _____ <input type="checkbox"/> Winter/Spring _____	
Have Comprehensive Education Plan in MyEdPlan Supporting Goal: <input type="checkbox"/> Yes <input type="checkbox"/> No		SMC Degree-Applicable Units Completed:	Currently Assigned Enrollment Date:

State why you believe an earlier enrollment date should be given to you (add other supporting documents separately):

I certify under penalty of perjury that all information and documentation provided in support of my request is legitimate and accurate. I also understand that if granted my appeal, it will be limited to the upcoming term and will not necessarily be for the earliest possible enrollment date available.

 Student Signature/Date

FOR OFFICE USE ONLY

Status: <input type="checkbox"/> Approved <input type="checkbox"/> Denied <input type="checkbox"/> Date Reviewed: _____ <input type="checkbox"/> New Enrollment Date: _____	Remarks/Instructions:
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