

## ACADEMIC APPEAL FORM

**ACADEMIC APPEAL DEADLINE: Wednesday before the semester begins (by the close of business).**

**INSTRUCTIONS: Complete both pages of this form and submit with supporting documentation to:**

Central Carolina Technical College ■ Student Records ■ 506 North Guignard Drive ■ Sumter, SC 29150  
 Fax: (803) 778-6693 ■ Email: [Records@cctech.edu](mailto:Records@cctech.edu)

**Appeals with no explanation and/or documentation will be denied.**

### A. Student Information:

STUDENT ID#	LAST NAME	FIRST NAME	M.I
ADDRESS (INCLUDE APT #)		CITY	STATE
MYCCTC EMAIL ADDRESS		PHONE NUMBER	
PROGRAM OF STUDY	ADVISOR	LAST SEMESTER ATTENDED	

### B. Reason for Appeal:

**Acceptable Reason(s) for Appeal** (Please check appropriate box(es) below)

- |  |   |                                      |
|--|---|--------------------------------------|
| <input type="checkbox"/> Personal illness                            | <input type="checkbox"/> Family difficulties    | <input type="checkbox"/> Other _____ |
| <input type="checkbox"/> Death or serious illness of a family member | <input type="checkbox"/> Financial difficulties |                                      |

Please check one:

- I am requesting to be returned from suspension for the upcoming semester (limited to 7 max hours)
- I am on "return from suspension" status and am requesting to enroll in more than 7 hours
- I am on academic warning or academic probation and am requesting to enroll in more than 13 hours

