Orangeburg- Calhoun Technical College

2013 Medical Programs

Appeal for Application Process

July 25, 2012

ORANGEBURG-CALHOUN TECHNICAL COLLEGE

2013 Medical Programs Application Appeal Process

An **appeal** shall be defined as the complete and timely documentation of an extenuating circumstance(s) that causes an applicant enrolled in college to fail to meet the academic requirements for regaining eligibility to apply to a 2013 Medical Program at OCtech. The two basis for appeals are:

- Cumulative Grade Point average
- Two unsuccessful (failed) attempts at any Medical Program

An **extenuating circumstance** shall be defined as a situation that involves a serious health condition of the student, death or serious health condition of an immediate family member, or a traumatic/extraordinary event. (See below)

An **immediate family member** shall be defined as the spouse, great-grandparents, grandparents, parents or legal guardians, brothers, sisters (including step-brothers/sisters), or children of either the student or the student's spouse.

A **serious health condition** shall be defined as an illness, injury, impairment, or physical or mental condition that involves: (1) Any period of incapacity or treatment in connection with or consequent to inpatient care in a hospital, hospice, or residential medical care facility; or (2) Any period of incapacity requiring absence from classes **for more than five consecutive class days** that also involves continuing treatment by (or under the supervision of) a health care provider; or (3) Continuing treatment by (or under the supervision of) a health care provider for a chronic or long-term health condition that is incurable or so serious that, if not treated, would likely result in a period of incapacity that would adversely affect the academic performance of the student.

A **traumatic/extraordinary event** shall be defined as a sudden, uncontrollable event which adversely affects the student's academic performance, such as a natural disaster (earthquake, hurricane, tornado, etc.), divorce, sexual assault, required missionary duty, active military duty, death of a significant non-immediate family member, or any other events deemed traumatic/extraordinary by the appeals committee.

Extenuating Circumstances
Extenuating circumstances are the following situations:

- Serious health condition of the student;
- Death or serious health condition of an immediate family member; or
- Traumatic / extraordinary event

In order to determine if a particular situation is an eligible extenuating circumstance, refer to the above "Definition of Terms." Please be aware that poor academic performance prior to the documented extenuating circumstance will impact the outcome of an appeal.

Also note that a traumatic event does not include college adjustment issues, such as: homesickness, problems with roommates, problems with the faculty or staff at the college or university, difficult course-load, misadvisement by financial aid officers or advisors, dependent care issues, transportation problems, financial issues etc. ***This is not an exhaustive list*. Other issues may be deemed as inappropriate for appeal.**

Time Limitation for Filing an Appeal

Interested Applicants must contact an Admission staff member within 14 days of attending a Health Information Program Session. Application for appeal will not be accepted or considered if student misses the deadline. It is very important that the interested applicant contact and have all documents submitted within the 30 day window in order to be considered for the appeal.

Filing an Appeal

The following is a checklist of the appeals documentation the student must submit to be considered:

- ✓ **Application for Appeal**

1) The student may obtain an Application for Appeal from the OCtech website by going to the Admissions tab, clicking on the Health Science Admissions page, then Appeal Process for Nursing and HS Admissions.

2) The application must be **completed and signed by the student. An unsigned application will be considered incomplete. It is not the responsibility of the admission staff to inform appellants if the application or portions thereof, are incomplete. Therefore, the incomplete appeal will not be considered.**

- ✓ **Letter of Request (Must be typewritten and signed by student)**

1) The student must state the reason for appealing and describe the extenuating circumstance(s) as defined in these guidelines that prevented him/her from being eligible to apply to a medical program.

2) The student must provide an explanation as to why he/she did not attend any and all terms during the academic year in question.

3) If the student is appealing because of poor academic performance, the student must explain to the Committee whether he/she used the institutional appeals process to have the grades changed due to an extenuating circumstance each term. The student must also explain each term of poor academic performance.

4) If the student is appealing due to a death of an immediate or a non-immediate family member, the student must explain in detail (1) the extent of the relationship; (2) how this situation affected his/her inability to meet academic requirements to renew the scholarship; and (3) how the situation meets the definition of a traumatic /extraordinary event. The student must also provide a letter from the counselor (Psychologist, Psychiatrist, Minister, etc.) detailing how the traumatic or extraordinary event affected the student's academic performance during the academic year in question.

5) If the student is appealing due to a chronic or long-term health condition, the student must be registered with the Coordinator for students with Disabilities at the beginning of each academic year, and the student should address this in their letter.

Supporting Documentation

Students are ultimately responsible for providing sufficient supporting documentation with their appeal which satisfies the burden of proof of an extenuating circumstance. Self-diagnosis or parental diagnosis of medical or mental health related conditions will not be considered for appeal. All appeals must include supporting documentation providing diagnosis from licensed professionals (i.e. physician, psychiatrist, etc.). Documentation may include:

For medical-related appeals:

1) Signed letter from the physician on letterhead (medical, psychiatrist, and/or psychologist) detailing duration and extent of serious health condition (this letter must include specific details and time period regarding the health condition) and any recommendations made regarding school non-attendance (fall, spring, and summer);
2) Hospital invoice and/or insurance statements;
3) For chronic or long-term health conditions, official letter from the Coordinator for students with disabilities verifying that the student is registered with their office. The letter must include specific details regarding all accommodations including any reduced course loads;
4) If the student served as a primary caregiver, documentation from a doctor or physician detailing time period in which student served in that capacity from doctor.

For death-related appeals:
1) Signed letter from the professional counselor on letterhead (psychiatrist, and/or psychologist, minister, etc.) detailing duration and extent of grief period (this letter must include specific details and time period regarding the effect the loss had on academic performance) and any recommendations made regarding school non-attendance (fall, spring, and summer);
2) Death certificate;
3) Newspaper obituary; and
4) Funeral program

For traumatic/extraordinary event appeals:
1) Signed letter from the professional counselor on letterhead (psychiatrist, and/or psychologist, minister, etc.) detailing duration and extent of event (this letter must include specific details and time period regarding the effect the event had on academic performance) and any recommendations made regarding school non-attendance (fall, spring, and summer);
2) Documentation from insurance company;
3) Police report;
4) Medical documentation; and
5) Legal/Court documents.

Medical Program Appeal Form

Student Name: _____ Student ID Number: _____

Address: _____

A. **Reason for Appeal:** Check Appropriate Box (below) & then address the following item(s) on a separate sheet, and include your name and student ID number at the top. The attached sheet should be typewritten.
    - GPA
    - Had two unsuccessful (failed) enrollments in any RN, PN, or Health Science Program

1. Reason for Appeal. (Explain the impact of the extraordinary circumstances – items checked below, as your basis for appeal that contributed to your academic deficiency/program failure.)
2. Resolution. (Describe how the circumstances have been resolved and will no longer be a hindrance to your academic performance.)

B. Basis for Appeal (Check appropriate)

- **Medical-related appeals**
- **Death-related appeals**
- **Traumatic/extraordinary event appeals**

Please attach this form to your typewritten "Reason for Appeal" explanation.

C. **College Review:** Submit this form to the Office of Admissions Nursing/Health Sciences Counselor.

_____ _____

Applicant Signature Date