

NEOMED TRANSFER CREDIT APPEAL NOTIFICATION

Disclaimer: Please refer to the Transfer Credit Appeal Policy in the NEOMED Policy Portal for full details on the guidelines and process of filing an appeal. Northeast Ohio Medical University (NEOMED) also abides by all academic policies in the NEOMED Compass.

Transfer credit appeals should only be submitted when a student believes there was a violation of their respective College's transfer credit policy or an inconsistency between their outcome and transfer credit applicability precedence in the College. Transfer credit appeals must be for legitimate disagreement with the transfer credit acceptance decision or the application of accepted credit to the respective College's curriculum. It is not appropriate to use this form simply because a student disagrees with College policy or precedence.

Instructions: If a student disagrees with the college's decision on a Transfer Credit Request, he/she may appeal the decision to the college's designated appeals officer by emailing a completed Transfer Credit Appeal Form to registrar@neomed.edu within ninety (90) days of receipt of the decision of transfer credit acceptance and/or applicability.

Appeals officers will review student concerns and the college's transfer credit policy with the respective associate dean or program director. A written response to the appeal will be sent via email to the student within thirty (30) days of receipt of the appeal.

If a student wishes to challenge the college-level appeal decision, he/she may appeal the decision in writing with all relevant documentation within thirty (30) business days to the University Registrar. A written response to the appeal will be sent to the student via email within thirty (30) days of receipt of the appeal.

TRANSFER CREDIT APPEAL FORM

Student Information:

Name:

Program of Study:

NEOMED Email:

Transfer Credit Information:

Course title:

Credit-granting institution:

Attendance Time Frame: From

to

Number of credits:

Please attach the following documentation to this appeal:

- Written explanation of the grounds of your appeal
- Course description of both the course you wish to transfer and that for which your transferred credit would apply
- Transfer Credit Request form, all documentation, and University correspondence related to your initial request. If challenging a college-level appeal decision, please include documentation of that correspondence.
- Any other documentation supporting your appeal

"I declare that the information on this form and all supporting documentation is true, correct and complete to the best of my knowledge and belief. I also understand that purposeful misrepresentation of my situation constitutes academic dishonesty and may make me subject to disciplinary action if enrolled as a NEOMED student at any time."

Signature

Date

Submit your appeal to registrar@neomed.edu. The Office of the Registrar will direct your appeal to the appropriate appeals officer.

Office of the Registrar use only:

Date received:

Outcome:

Processor initials: