



North Hennepin
Community College

Appeal Form: Degree or Transfer Requirements

7411 Eight-fifth Avenue North
Brooklyn Park, MN 55445
Counseling and Advising
763-424-0703

Last Name, First Name: _____ Student ID or SSN: _____

Street Address: _____

City, State, ZIP: _____

Email Address: _____ Phone: _____

Program/Major: _____ Degree: AA; AS; AAS; AFA; Cert

I request the following exception to program/major and/or degree requirements: (check ONE and complete)

- Substitute _____ in place of _____
(course) (course)
- Waive _____ Requirement
(course)
- Add _____ to Goal Area _____
(course)
- Other _____

Based on the following reason(s):

*Schedule an appointment with a Counselor or Advisor (763-424-0703) for a preliminary review of your appeal.
Your appeal will be considered by the appropriate Dean.*

***** Office Use Only*****

- Preliminary review completed.
- Preliminary review completed with the following comments: _____

Counselor/Advisor Signature: _____ Date: _____

- Approved
- Denied

Comments:

Dean Signature: _____ Date: _____