**LOYOLA UNIVERSITY CHICAGO**

**SCHOOL OF SOCIAL WORK**

**DISMISSAL APPEAL FORM**

For information on the dismissal appeal process, see p. 47 of the [Student Handbook](https://view.officeapps.live.com/op/view.aspx?src=https%3A%2F%2Fwww.luc.edu%2Fmedia%2Flucedu%2Fsocialwork%2Fpdfs%2Facademicadvising%2Fstudentmanuals2022%2FSpring%252023%2520MSW%2520Handbook_.docx&wdOrigin=BROWSELINK). Please submit this form electronically to the relevant [Program Director or Assistant Dean](https://www.luc.edu/socialwork/student-support/forms/) (Scroll to “Forms”).

Student name:       LUC ID number:

Mailing address:

Telephone:       Cell phone:       Personal e-mail:

Program:

Academic Advisor:

Name of instructor:

Students must submit the following information for the appeal:

Copy of unofficial transcript

A letter outlining (1) the nature of the issue of the dismissal appeal and (2) the results of your efforts toward resolution up to this point (e.g. time and date of informal meetings, etc.).

Copy of the syllabus and any relevant course material(s).

If it is an internship appeal, a copy of the internship evaluation as appropriate.

In addition to the aforementioned information, if the appeal is a secondary appeal to the Dean, the following information is required:

Copy of dismissal letter

Copy of outcome letter from the first appeal

New dismissal appeal form

Student signature:       Date:

(Please type your name to electronically sign)

# 

# Office Use Only

*Date received*       *Date of hearing*       *Date of notice sent*

Sample format for the dismissal appeal letter

**LOYOLA UNIVERSITY CHICAGO**

**SCHOOL OF SOCIAL WORK**

Date

Attn: (insert Program Director/Assistant Dean name here)

Chair, Committee of Student Affairs

820 N. Michigan Ave.

Chicago, IL 60611

Re: Include one sentence on the nature of the dismissal appeal for (insert class and instructor’s name)

Dear (Director/Assistant Dean),

Insert the body of your dismissal appeal letter that outlines: (1) the nature of the issue of the appeal and (2) the results of your efforts to resolve them up to this point (e.g. time and date of informal meetings, etc.).

* The first paragraph should provide a short description of the appeal to include the requested outcome.
* The remaining paragraphs should document the facts associated with this appeal to include attempts to resolve the issue.
* The letter should be no longer than two pages in total.
* A meeting is not required but if interested please include your availability to meet (days of the week and best times) and a contact number in your letter.

Signature

Sample letter for a secondary appeal to the Dean

**LOYOLA UNIVERSITY CHICAGO**

**SCHOOL OF SOCIAL WORK**

Date

Attn: (insert name of Dean)

Dean; School of Social Work

Re: Include one sentence on the nature of the dismissal appeal for (insert class and instructor’s name)

Dear Dean (insert the last name),

Insert the body of your secondary appeal letter. A meeting is not required but if interested please include your availability to meet (days of the week and best times) and a contact number in your letter.

Signature

Please send all materials for the secondary appeal to:

James Marley PhD, LCSW

Dean School of Social Work

820 N. Michigan Ave. Chicago, IL 60611

Loyola University Chicago School of Social Work