Notice of Appeal: Postgraduate Tribunal

Appellant:	Last name	First name	Student number
Respondent:	Last name	First name	
Decision under Appeal:	Name of the decision-maker or chair of decision-making body	Name of the decision-maker's board or office	Date of decision
Appellant's Mailing Address:		Appellant's Residential Address: (If different):	
Appellant's Principal Phone #:		Appellant's Alternate Phone #:	
Appellant's Email:		Appellant's Fax #:	
 Indicate with a √ that the following REQUIRED documents are attached: Statement of the Grounds of Appeal, the Underlying Facts and the Remedy Sought List of Relevant Documents (copies of all documents must also be attached) List of the Appellant's Potential Witnesses Name of Appellant's Counsel (if any) 			
Indicate which of the s.18 power(s) listed here the Appellant REQUESTS the Board exercise in this appeal:			
	s.18(a)v s.18(a)i: s.18(a)x	x 🔲	
Date:		Signature:	