## **Aegrotat Grade Request Form**

**REGISTRAR & ENROLMENT SERVICES** 

## IMPORTANT INFORMATION

An aegrotat grade may be granted for a student in certain circumstances where the student is unable to complete the coursework because of a permanent disability or an incapacity of a catastrophic nature that extends beyond the last day of the first month of the next semester. If the student is able to complete the coursework by the last working day of the first month of the next semester, a deferred standing request must be submitted.

Deadline to submit aegrotat request: The day after the last day of final exams.

From Policy E2007: Aegrotat Grade

· Aegrotat grade (AEG): a grade given on medical or compassionate grounds by the Registrar. An aegrotat grade is not calculated into the CGPA, full course credit is assigned, noted as AEG on a student's transcript, and presented as a minimum pass for graduation purposes. Departmental permission is required to use an aegrotat grade for prerequisite or program progression purposes.

It is the student's responsibility to read and understand Policy E2007: Aegrotat Grade, available on the Langara College website.

PART A: TO BE COMPLETED BY THE STUDENT		
Langara ID:	Full legal name:	
Phone:	Email:	
I wish to be considered for an aegrotat grade for the following course(s):		
COURSE SUBJECT AND NUMBER	EXAM DATE (If missed Final Exam)	COURSE WORK STILL REQUIRED
All appeal submissions, including aegr	otat requests, require a co	ompleted form, a letter of explanation, and documentary
evidence of extenuating circumstances. Please confirm you meet the criteria outlined below before submitting your appeal.		
Incomplete appeals will not be reviewed.		
I have attached a letter explaining why I want to be considered for an aegrotat grade.   Yes No		
		ances or Part B has been completed by an appropriate copies of the original documents and official/notarized
[RSBC 1996, Chapter 52, Section 41.1] for the Freedom of Information and Prote	he purpose of processing yo ection of Privacy Act [RSBC	rmation under the authority of the College and Institute Act our aegrotat grade request, and in compliance with the provisions 1996, Chapter 165, Section 33.1]. For questions about the collection, rar & Enrolment Services at 604.323.5225.
Student's signature:		Date (YYYY/MM/DD):





PART B: TO BE COMPLETED BY AN APPROPRIATE PROFESSI	ONAL (IF APPLICABLE)	
Surgeons of BC, a Dentist registered with the College of De	vidual who is registered with the College of Physicians and ental Surgeons of BC, a registered psychologist of the College of the College of Registered Nurses of BC, a Registered Clinical Social ran equivalent registered professional out of the Province.	
When did the student first see you regarding this extenuate	ing circumstance?	
How does this extenuating circumstance impact the stude	nt's ability to attend classes and complete coursework?	
	rotat grade due to extenuating circumstances: Yes No	
Professional's title:	Professional's full name:	
Professional's signature:	Date (YYYY/MM/DD):	
STAMP OR PRINT PROFESSIONAL'S NAME AND ADDRESS:	Mark "Confidential" and submit completed form to: Appeals, Registrar & Enrolment Services, Langara College, 100 West 49 <sup>th</sup> Ave., Vancouver, BC, V5Y 2Z6 Fax: 604.323.5590 Email: appeals@langara.ca	
OFFICE USE ONLY		
Decision:		
Comments:		
Initial:	Date (YYYY/MM/DD):	



