



Louisiana State University at Eunice

Office of Office of Academic Affairs  
P.O. Box 1129 ■ Eunice, LA 70535  
Phone (337) 550-1301 ■ Fax (337) 550-1306

**Student Appeal Form used for Step Three**

(Bullet points refer to the Step Three procedure in [Policy Statement Number 8 on page 6.](#))

a. Name \_\_\_\_\_ Student No. \_\_\_\_\_

Name/title of person to whom the Step Three appeal is being filed:

Name \_\_\_\_\_

Title \_\_\_\_\_

b. Student \_\_\_\_\_ Employee \_\_\_\_\_ (check one)

c. Division \_\_\_\_\_ Curriculum \_\_\_\_\_

d. Advisor (see the [Definition of Advisor](#)):

Name \_\_\_\_\_

Title or Relationship \_\_\_\_\_

e. List name and title of the University employee to whom the appeal was made at Step One:

Name \_\_\_\_\_

Title \_\_\_\_\_

f. List name and title of the University employee to whom the appeal was made at Step Two:

Name \_\_\_\_\_

Title \_\_\_\_\_

- g. Description of the grievance (see the [Definition of Grievance](#)); this should match Step One item (a) and Step Two item (c)

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- h. Description of the resolution sought

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j. attached all documentation from Steps One and Two

Student Signature \_\_\_\_\_ Date \_\_\_\_\_

If sufficient space is not provided, write "see attached" and attach your appeal statement written on 8 1/2 x 11 paper in accordance with the provisions of [Step Three](#) of the appeal procedure.