

REGISTRATION APPEAL

EMPLOYMENT CONFLICT VERIFICATION FORM



A Registration Appeal is a petition filed by the student to be withdrawn past the published deadline due to a personal extenuating circumstance that occurred during the semester. This form is for students whose work schedule was changed as required by their employer in a way that directly interferes with their class schedule. Employer verification is required to confirm the circumstance was beyond the student's control and unforeseeable.

STUDENT INFORMATION AND RELEASE

(To be completed by the student.)

I authorize the release of my employment records to Salt Lake Community College to provide details relevant to my appeal, such as grades and class schedule, to my employer (named below) as needed to accurately evaluate my request.

Student's Name: _____

Student's ID Number: _____

Student's Signature: _____ Date: _____

EMPLOYER VERIFICATION

(To be completed by the supervisor or HR department.)

Date the work schedule change was implemented: _____

MM/DD/YYYY

Did the student apply and/or accept an offer of employment that resulted in a work schedule that conflicts with their school schedule? Yes ___ No ___

Have you or has your organization required a work schedule change that now conflicts with this student's class schedule? Yes ___ No ___

Brief description of the reason for the schedule change (e.g. staffing needs, business hours change):

Comments:

EMPLOYER INFORMATION AND SIGNATURE

(To be completed by the supervisor or HR department.)

The Salt Lake Community College Registrar's Office may contact you to confirm that the information provided on this form is not fraudulent or altered, or to obtain clarification regarding the appeal.

Printed Name: _____ Title: _____

Company/Institution/Organization Name: _____

Email: _____ Phone: _____

Signature: _____ Date: _____