

**MONTANA STATE UNIVERSITY
COLLEGE OF NURSING**

POLICY # A-8

TITLE: COLLEGE OF NURSING SCHOLASTIC COMMITTEE

POLICY: The Scholastic Committee considers students' appeals for waivers and substitutions of courses, variances in progression, and reinstatement into the College of Nursing.

RATIONALE: The MSU Faculty Handbook and the University Bulletin provide for a scholastic committee for each college. The inclusion of such a committee in the college's administrative structure protects the rights of students to an impartial hearing, fosters an attitude of trust in the due process structure of the college, and enables faculty to participate in the administration of standards they have established.

PROCEDURE: The Committee, appointed annually by the Dean, is composed of at least three faculty members, and chaired by the Associate Dean for Undergraduate Programs (non-voting) who also convenes the committee. The Committee meets at least three times each year, or as often as necessary, to provide a timely hearing for student appeals. The membership of this committee is confidential.

Students wishing to appeal to the Scholastic Committee will meet with their Academic Advisor, fill out and sign the attached Scholastic Committee Appeal Form, and submit the appeal form along with all transcripts, required documentation, and letters of support to the Office of the Associate Dean for Undergraduate Programs by May 1, August 1, or December 1 for the regularly scheduled meetings of the Committee during May, August and December each year.

The decision of the committee may be appealed to the Dean of the College of Nursing. These appeals must be forwarded to the Dean within 5 working days after a response from the Committee has been received by the student.

Reviewed/Approved by:

Level I: Executive Council (January, 2006)

Level II: Associate Dean for Undergraduate Programs (January, 2006)

**Montana State University
College of Nursing
Policy A-8 Attachment:
Scholastic Committee Appeal Form
(please print all information)**

Name of Student: _____ Name of Advisor: _____

Address: _____ Campus: _____

Phone #: _____ Level in Program: Pre-nursing

E-mail: _____ (circle one) Sophomore

Student ID# or SS# _____ Junior

Current cum GPA: _____ Senior

(Attach copy of current transcript)

Type of Appeal (Please check the appropriate box(es)):

1) Variance in Progression (attach rationale for this request):

- I request a waiver of _____ course(s)
- I request a substitution of _____ course(s) for _____ course(s)
- I request to take the _____ required prerequisite course(s) concurrently with _____ course(s)

2) I request permission to apply for an Upper Division placement in the College of Nursing with more than one attempt to earn a grade of C or better in a required prerequisite course:

- I have failed to achieve a grade of C or better on two attempts in _____ course(s)

3) I request reinstatement to the College of Nursing:

- I have failed to achieve a grade of C or better on two attempts in two different semesters in _____ clinical nursing course(s)
- I was removed from the College of Nursing for other reasons which are listed below

4) I am making a miscellaneous request (please specify in the provided space):

I have Upper Division placement on the _____ Campus for Fall _____ or Spring _____ semester.

I am currently on the Wait List for Upper Division placement on the _____ Campus for the Fall _____ or Spring _____ semester.

Student Signature/Date: _____

Advisor Signature/Date: _____

Please attach any letters of support or documentation of **extraordinary** circumstances to be considered in this appeal.