

**The University of North Carolina at Pembroke
Educator Preparation Program
Policy Appeal Form**

Name _____ Banner Number _____

Current Telephone Number _____ Email _____@bravemail.uncp.edu

Educator Preparation Program / Licensure Area _____

Advisor _____

Program Coordinator _____

NOTE: AN APPEAL AFFECTING ENROLLMENT IN AN INTERNSHIP SHOULD BE FILED BY THE INTERNSHIP DEADLINE. [HTTPS://WWW.UNCP.EDU/INTERNSHIP-STUDENT-TEACHING](https://www.uncp.edu/interhip-student-teaching) APPEALS FILED LATER MAY NOT BE RESOLVED IN TIME TO ALLOW INTERNSHIP PLACEMENT.

To be eligible for enrollment in the professional internship semester and take a course during internship each candidate must:

1. Be fully admitted to the Educator Preparation Program one full semester prior to student teaching (excluding summer sessions)
2. Have completed all required General Education courses;
3. Have satisfactorily completed all required specialty area, professional studies, or content pedagogy courses;
4. Have not more than six semester hours of degree requirements remaining. The remaining six hours shall not include any specialty area, professional studies, or content pedagogy courses and these six hours must be approved by the candidate's advisor and the Dean of the School of Education;
5. Have an overall grade point average of 2.7 or better as well as a 2.7 or better in the candidate's major field of study;

Describe the reason for your appeal and clearly justify why you are appealing the policy. If you are requesting to take a course during internship, you must state which course you have identified and why this is still needed.

Note: Your description must include appropriate details; if you are asking to take a course with the internship, you must state which course, how it fits into your course of study, and exactly why you have not completed that course prior to the internship. If you have not completed all required courses (General Education, specialty area, professional studies, content pedagogy, etc.), state clearly which courses you have yet to take.

Insert text here

Directions: read the statement below and sign to attest that you understand. Review with your Program Coordinator and have them sign and date their decision. Then deliver this form to the Dean's office (SOE 110).

I understand that in addition to this application, I may attach statements prepared by faculty and/or advisors who are familiar with, or affected by, my request and/or appeal situation. This appeal will be processed in a timely manner. I understand that if I have not submitted this appeal by the internship deadline, it may not be possible to resolve my appeal by the end of the semester.

Student's Signature _____ Date submitted to the Program Coordinator _____

Program Coordinator _____ Approved _____ Date: _____
Denied _____ Date: _____

Dean, School of Education _____ Approved _____ Date: _____
Denied _____

Date referred to Appeals Committee: _____ Revised: August 2023