

### **MSPE Appeal Form**

Office of Medical Education College of Medicine 9700 West Taron Drive Elk Grove, CA 95757

#### PROCEDURE FOR FILING AN MSPE APPEAL

Students may file an appeal if there is a disagreement with the content of their MSPE. Students wishing to appeal must follow the steps outlined below.

#### First Step: Student Statement

The student must try to resolve any issues with their MSPE by consulting with their M3/M4 Faculty Advisor.

#### Second Step: Associate Dean of Academic and Career Advising Statement

If the student is not satisfied after the initial discussion with his or her Faculty Advisor, the student can initiate the formal MSPE appeal process in writing using this MSPE Appeal Form. The student must complete **sections I and II** and submit the form to the Associate Dean of Academic and Career Advising for review.

He or she will respond to the student request in writing within **10 business days** of receiving the request and will return a copy of this form to the student in case they wish to pursue the matter further.

- If the appeal is approved by the Associate Dean of Academic and Career Advising, he or she will inform the student and the student's faculty advisor to make the appropriate changes to the MSPE.
- If the student decides not to pursue the appeal further, they are to sign Section III and return this form to the Associate Dean of Academic and Career Advising.
- If the appeal is denied, the student has **2 business days** from the date of the Dean's response to appeal in writing to the Office of Medical Education using <u>Section IV and submit it to the Associate</u> Dean of Medical Education.

#### Third Step: Appeal to Office of Medical Education

The student will sign and submit this form to the Associate Dean of Medical Education in the Office of Medical Education if they wish to pursue the appeal process.

- If the appeal is approved, he/she will inform the student and the student's faculty advisor to make the appropriate changes the MSPE.
- If the appeal is not approved, the student has **2 business days** from receipt of the form from the OME to appeal in writing to the Dean of the College of Medicine using <u>Section V</u>.

#### Fourth Step: Dean of the College of Medicine

If the Associate Dean of Medical Education denies the appeal, the student has **2 business days** from receipt of the form to submit an appeal in writing to the Dean. The Dean will render the final decision in writing within **10 business days** of receipt of the formal appeal. The Dean's decision is final. **If a change to the student's MSPE is determined by the Dean, they will inform the student's Faculty Advisor of the necessary amendments to the MSPE before it is released into ERAs.** 



# **MSPE Appeal Form**

Office of Medical Education College of Medicine 9700 West Taron Drive Elk Grove, CA 95757

## **SECTION I: STUDENT INFORMATION**

Name:				
Last		First		Middle
Student ID#:	Class of:	Date of Birth:_	Phone#:	
Address:				
Street/Apt. N	umber			
City		State	Zip	
Graduating Class of:			Faculty Advisor:	
SECTION II: STUDE	NT STATEMENT	•		
	Please att	ach an additional page if n	nore space is needed.	
Student's Signature			Date	

# SECTION III: ASSOCIATE DEAN OF ACADEMIC AND CAREER ADVISING MSPE APPEAL REVIEW (DEAN USE ONLY)

I have reviewed the MSPE appeal and my dec	cision is to:				
☐ Uphold the appeal					
☐ Decline the appeal					
The basis for my decision is:					
Signature:	Date:				
Michael Wong, Associate Dean of Academic and Car					
SECTION III: STUDENT ACCEPTANCE OF APPEAL DECISION	ASSOCIATE DEAN OF ACADEMIC AND CAREER ADVISING				
I have reached a satisfactory resolution of m Advising.	y MSPE appeal through the Associate Dean of Academic and Career				
Student Signature:	Date:				
SECTION IV: STUDENT APPEAL TO OF	FICE OF MEDICAL EDUCATION				
satisfactory resolution of my appeal through	in the MSPE Appeal Procedure and have been unable to reach a the Associate Dean of Academic and Career Advising. I wish to Medical Education in the Office of Medical Education.				
Student's Signature:	Date:				
	CATION APPEAL REVIEW (OME USE ONLY) endered by the Associate Dean of Academic and Career Advising and				
☐ Uphold the appeal					
☐ Decline the appeal					
The basis for my decision is:					
-					

-	
_	
- Signature:	
Catherine Yang, Associate Dean of Medical Education	
SECTION V: STUDENT APPEAL TO THE DEAN OF THE	COLLEGE OF MEDICINE
SECTION V. STUDENT ATTEAL TO THE DEAN OF THE	COLLEGE OF MEDICINE
I have followed the informal process outlined in the MSPE Appe satisfactory resolution of my appeal. I wish to appeal my course	
Student's Signature:	Date:
SECTION V: DEAN OF COLLEGE OF MEDICINE APPEAL	REVIEW (DEAN USE ONLY)
The appeal has been reviewed according to the formal MSPE ap to:	peal procedure. A <u>final decision</u> has been made
□ Uphold the appeal	
☐ Decline the appeal	
The basis for my decision is:	
_	
Signature:	Date:
Ioseph Silva, Dean, California Northstate University College of Medicine	