

Aegrotat Grade Request Form

REGISTRAR & ENROLMENT SERVICES

IMPORTANT INFORMATION

An aegrotat grade may be granted for a student in certain circumstances where the student is unable to complete the coursework because of a permanent disability or an incapacity of a catastrophic nature that extends beyond the last day of the first month of the next semester. If the student is able to complete the coursework by the last working day of the first month of the next semester, a deferred standing request must be submitted.

Deadline to submit aegrotat request: The day after the last day of final exams.

From Policy E2007: Aegrotat Grade

- Aegrotat grade (AEG): a grade given on medical or compassionate grounds by the Registrar. An aegrotat grade is not calculated into the CGPA, full course credit is assigned, noted as AEG on a student's transcript, and presented as a minimum pass for graduation purposes. Departmental permission is required to use an aegrotat grade for prerequisite or program progression purposes.

It is the student's responsibility to read and understand Policy E2007: Aegrotat Grade, available on the [Langara College website](#).

PART A: TO BE COMPLETED BY THE STUDENT

Langara ID: _____ Full legal name: _____

Phone: _____ Email: _____

I wish to be considered for an aegrotat grade for the following course(s):

| COURSE SUBJECT AND NUMBER | EXAM DATE (If missed Final Exam) | COURSE WORK STILL REQUIRED |
|---------------------------|-------------------------------------|----------------------------|
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All appeal submissions, including aegrotat requests, require a completed form, a letter of explanation, and documentary evidence of extenuating circumstances. Please confirm you meet the criteria outlined below before submitting your appeal. Incomplete appeals will not be reviewed.

I have attached a letter explaining why I want to be considered for an aegrotat grade. Yes No

I have attached official documentation of extenuating circumstances or Part B has been completed by an appropriate professional. (For documentation not in English, I have included copies of the original documents and official/notarized translations.) Yes No

Release of Information: Langara College collects your personal information under the authority of the College and Institute Act [RSBC 1996, Chapter 52, Section 41.1] for the purpose of processing your aegrotat grade request, and in compliance with the provisions of the Freedom of Information and Protection of Privacy Act [RSBC 1996, Chapter 165, Section 33.1]. For questions about the collection, use and disclosure of your personal information, contact the Registrar & Enrolment Services at 604.323.5241.

Student's signature: _____ Date (YYYY/MM/DD): _____

PART B: TO BE COMPLETED BY AN APPROPRIATE PROFESSIONAL (IF APPLICABLE)

An appropriate professional is an Indigenous Elder, an individual who is registered with the College of Physicians and Surgeons of BC, a Dentist registered with the College of Dental Surgeons of BC, a registered psychologist of the College of Psychologists of BC, a Nurse Practitioner registered with the College of Registered Nurses of BC, a Registered Clinical Social Worker registered with the BC College of Social Workers; or an equivalent registered professional out of the Province.

When did the student first see you regarding this extenuating circumstance?

How does this extenuating circumstance impact the student's ability to attend classes and complete coursework?

In my opinion, the student is unable complete course requirements on the dates from: _____ to _____

In my opinion, the student should be considered for an aegrotat grade due to extenuating circumstances: Yes No

Comments:

Professional's title: _____ Professional's full name: _____

Professional's signature: _____ Date (YYYY/MM/DD): _____

STAMP OR PRINT PROFESSIONAL'S NAME AND ADDRESS:

Mark "Confidential" and submit completed form to:
Appeals, Registrar & Enrolment Services,
Langara College, 100 West 49th Ave., Vancouver, BC, V5Y 2Z6
Fax: 604.323.5590
Email: appeals@langara.ca

OFFICE USE ONLY

Decision:

Comments:

Initial:

Date (YYYY/MM/DD):