

## **TEXTBOOK SERVICE APPEALS FORM**

Complete all pages of the form

## Requirements for submitting appeal:

Complete all items below and attach supporting documentation as to what prevented you from returning your textbook by the deadline. Examples of documents that may be attached include: medical bills, obituary and military paperwork. Reason for the appeal and dates on documentation must be near or during the week of returns.

Rental policy, dates, and deadlines are included in university publications, available online and are explained to you by the Textbook Service staff during issues. It is the student's responsibility to know these dates.

This request will be reviewed by the Textbook Service management and the student will be notified of their decision. DECISIONS ARE FINAL.

## Appeals without documentation will not be accepted.

Return deadlines are <u>always</u> the Saturday of finals week.

## Appeal forms will only be accepted if they are submitted within 14 days from the semester return deadline. Any form submitted after that time will be rejected.

I have read and understand the above: (please initial).								
Student Information: (Please Pr	rint)							
Name:			800 Number:					
Address:			Phone:					
City	State	Zip Code	e-ID:					
TERM: (Circle Term and fill in year)	FALL	SPRING	SUMMER	YEAR:				
id you take your finals? No Yes Date/Time of last final:								
Please note: Be thorough in you once. Attach documentation to			ollowing page as	appeals will be reviewed only				
I certify that the information I have so	ubmitted i	s complete and a	accurate.					
Student Signature			Date					
Submit/Mail to: SIUE								

Textbook Service Campus Box 1053, Edwardsville, II 62026

Phone: 618-650-3020 Fax: 618-650-5757 Email: textbooks@siue.edu



<b>EXPLAINATION OF</b>	APPEA	۱L:					
LICT AND ATTACHED		SSTIMO	DOO! IMEN!	TATION!			
LIST ANY ATTACHED  1)	SUPPL	<u>)KTING</u>	DOCUMEN	4)			
2)				5)			
3)				6)			
FOR OFFICE USE ON							
First time appeal?	No	_ Yes	Date o	of previous a	ppeal:		
Problem File: _	No _	_ Yes					
Review: Appr	Review: Approved: Approved			d w/Doc:	D	enied:	
Reason/Comment:							
Student notified:	_ No	_ Yes	Method:	Letter	Email	Phone	