

**UNIVERSITY OF TORONTO  
GOVERNING COUNCIL**

Report #419 of the Academic Appeals Committee  
**June 15, 2022**

To the Academic Board  
University of Toronto

Your Committee reports that it held an electronic hearing, conducted by Zoom on March 29, 2022, at which the following members were present:

**Academic Appeals Committee Members:**

Dr. Erika J. Murray, Chair  
Professor Jan Mahrt-Smith, Faculty Governor  
Ms. Susan Froom, Student Governor

**Hearing Secretary:**

Ms. Nadia Bruno, Special Projects Officer, Office of Appeals, Discipline and Faculty Grievances

**For the Student Appellant:**

Ms. P.S. (the “Student”)

**For the University of Toronto Mississauga:**

Professor Michael Lettieri, Vice-Dean, Academic Experience, University of Toronto Mississauga  
Ms. Chioma Nwabugwu, Assistant Registrar, Academic Standards, University of Toronto Mississauga

**I. Appeal**

This is an appeal from a decision of the Academic Appeals Subcommittee of the University of Toronto Mississauga (the “Division”) dated July 5, 2021 which refused to allow the Student late withdrawal without academic penalty from the following five courses (“the five courses”) spanning from Fall 2015 to Winter 2018:

PSY100Y5Y, 2015(9);  
PSY201H5F, 2017(9);  
PSY210H5F, 2017(9);  
PSY230H5F, 2017(9); and  
PSY210H5S, 2018(1).

**II. The Facts**

The Student first registered with the University of Toronto (the “University”) in the Fall 2015 term. After the Winter 2016 term, the Student was placed on academic probation because her CGPA fell below 1.50. After the Summer 2016 term, her CGPA remained below 1.50, and, as a result, she was suspended for one year. The Student returned to the University in the Fall 2017

term. At the end of the Winter 2018 term, her CGPA remained below 1.50, and as a result, she was suspended for three years.

Three years later, on March 14, 2021, the Student submitted petitions for late withdrawal without academic penalty for the five courses, spanning from 2015 to 2018. The Student's petition statements for the five courses were identical. She outlined that her mental health from 2016 to 2018 provided challenges that led her to do poorly in school, be placed on academic probation, and eventually on academic suspension. The Student sought medical treatment from the Division's Health and Counselling Centre and from her family doctor, who then referred the Student to a psychiatrist whom she saw regularly in 2018.

In August 2018, the Student successfully petitioned to have the 3-year suspension lifted. The Student returned to the University on academic probation, in Fall 2018. The Student continued to take courses until the end of the Winter 2021 term, when her CGPA again fell below 1.50. At the end of the Winter 2021 session, the Student's status was "suspended for three years."

The Student petitioned to have the five courses removed from her academic record because, as reflected in her petition statement, "my condition had caused me to do poorly in school. I wish to appeal for the grades that I have failed during that time as they do not reflect my best work." In support of her petitions, the Student submitted:

- a. A medical document (psychiatric assessment) dated March 1, 2021 from her psychiatrist Dr. J.S. Dhaliwal ("Dr Letter 1");
- b. A medical document (psychiatric consultation) dated June 15, 2018 from her psychiatrist Dr. J.S. Dhaliwal ("Dr Letter 2");
- c. A medical document (partial psychiatric assessment) dated June 22, 2018 from her psychiatrist Dr. J.S. Dhaliwal ("Dr Letter 3");
- d. University of Toronto Verification of Student Illness or Injury (VOI) Form dated August 12, 2018 completed by Dr. J.S. Dhaliwal. The VOI Form noted that the Student had multiple visits with Dr. J.S. Dhaliwal, had moderate and serious incapacitation circled on the form, handwriting indicating starting in "Sept 2017" with no anticipated end date and with a last seen handwritten date of "June 22, 2018" signed by psychiatrist Dr. J.S. Dhaliwal. (VOI Form #1); and
- e. A copy of prescription receipts for Clonopam (used to treat panic disorders and seizures), Clonazepam (used to prevent and control seizures), and Rexulti (used to treat certain mental disorders such as schizophrenia and depression), all dated June 15, 2018. ("the prescriptions").

The Student's petition requests were all refused. The petition denial messages for all five courses (cited above) were identical. The Student was provided with the same copied and pasted message from five different Instructors for each of her five petitions:

Your petition for late withdrawal without academic penalty has been refused because you completed the course.

Late withdrawal without academic penalty cannot be granted after a student shows their intent to complete a course by writing the final examination (or the final term test/assignment in courses without final exams).

If you are having difficulty in a course, you are expected to drop it on ACORN by the published drop deadline. If you did not do so and are still having difficulty after the drop deadline, you are expected to request late withdrawal after the drop date (LWD) status by the last day of class. Refer to the UTM Academic Calendar ([https://student.utm.utoronto.ca/calendar//calendar\\_detail2.pl?Topic=Dropping%20Courses](https://student.utm.utoronto.ca/calendar//calendar_detail2.pl?Topic=Dropping%20Courses)) and the online form (<https://registrar.utm.utoronto.ca/student/LWD/>).

You are encouraged to seek academic advising in the Office of the Registrar to discuss your academic progress and strategies for future success and to review the Petitions website (<https://www.utm.utoronto.ca/registrar/current-students/petitions>) with respect to the appeal process.

In response, on April 8, 2021, the Student submitted an Appeal to the Committee on Standing ("COS") enclosing additional medical documentation in support of her appeal.

On appeal to the COS the Student submitted:

- a. An Appeal Notice ("Appeal Notice");
- b. A Letter from a Lead Counsellor, Office of the Registrar dated April 26, 2021 ("Health & Counselling Centre Letter");
- c. A VOI Form indicating Dr. J.S. Dhaliwal had multiple/on-going visits with the Student and that she was last seen June 22, 2018. The VOI Form is dated March 29, 2021, severe and moderate incapacitation are checked off on the form handwritten starting in "yr 2018" with a "not known" anticipated end date signed by a psychiatrist Dr. J.S. Dhaliwal. (VOI Form #2);
- d. A medical document (psychiatric assessment) dated April 5, 2021 from her psychiatrist Dr. J.S. Dhaliwal ("Dr Letter 4"); and
- e. Three Academic Advising Walk-in Appointment Notes from the Office of the Registrar [General Advising – Per Request] dated May 12, 2016, December 5, 2017 and March 1, 2018.

The Student's appeals were all denied. Each of the COS members provided the Student with the exact same copied and pasted response for each of her five appeals:

The Committee on Standing (COS) has reviewed your appeal and upheld the previous petition refusal.

If you wish to appeal this decision to the UTM Academic Appeals Subcommittee (AAS), please contact Tali Ajimal, Coordinator, Academic Appeals and Integrity at [academicappeals.utm@utoronto.ca](mailto:academicappeals.utm@utoronto.ca)

It is recommended that you seek academic advising in the Office of the Registrar prior to submitting an appeal to the AAS.

Students have 90 days from receiving their refused appeal decision, from the Committee on Standing, to submit a request to have their appeal considered by the Academic Appeals Subcommittee. Once you submit your appeal and documentation you will be contacted regarding the scheduling of your hearing.

We recognize that this decision may be upsetting to you. Should you experience distress during this time and require additional supports, you may contact Good 2 Talk, a post-secondary student helpline available 24/7/365 at 1-866-925-5454.

On June 10<sup>th</sup>, 2021 the Student appealed the refusals to the Academic Appeals Subcommittee ("AAS"). The Student did not submit any additional supporting documentation to the AAS. The Student's appeal was heard virtually on June 21, 2021. There is nothing in the record about what was asked or said at the AAS hearing nor what evidence before the subcommittee, if any, was considered. On July 5, 2021, the Student received a letter from the Chair of the AAS advising her that her appeal was refused. The letter provided the following comments:

- (1) While the Subcommittee sympathized with the difficulties you faced, the members of the Subcommittee noted that you did not present a compelling case, which would prompt the Subcommittee to exempt you from an academic regulation.
- (2) The Subcommittee encourages you to familiarize yourself with the rules and regulations of the University. You are expected to make responsible decisions in order to effectively manage your course load.
- (3) The Subcommittee strongly recommends that you make regular appointments with staff of the [Robert Gillespie Academic Skills Centre](#) regarding the development of your academic skills.

On November 1, 2021, the Student appealed the decision of the AAS to the Academic Appeal Committee ("AAC").

### III. Decision

The function of this AAC is to hear and consider appeals made by students against decisions of faculty, college or school councils (or committees thereof) in the application of academic regulations. Since each division of the University is required to have its own appeal processes, the AAC is in effect a reviewing body and not a forum for fresh decision-making. Put simply, the AAC decides whether the Division's decision was reasonable. In considering the reasonableness of the decision of the Divisional appeal body, the AAC is to consider the facts and whether the academic regulations and requirements were applied *correctly, consistently, and fairly*<sup>1</sup>; and ultimately whether the decision was an unreasonable one, or if it was made through a demonstrably unfair interpretation and/or application of the relevant policies, processes and procedures that were relied upon or invoked in its making<sup>2</sup>. If the decision was unreasonable or there was an unfair interpretation and/or application of the relevant policies, processes or procedures, only then should the AAC interfere with the decision<sup>3</sup>.

Various levels of academic appeal committees have on a number of occasions dealt with petitions for late withdrawal from a course without academic penalty and have consistently stressed that this remedy should not be lightly granted. This Panel of the AAC (this "Committee") agrees. Indeed, a Division's decision not to grant the remedy of late withdrawal without academic penalty should not be over-ruled by the AAC except where the Division appears not to have followed its own published processes fairly and reasonably or in other unusual and unique situations, for example, if there were exceptional or extraordinary circumstances where a student may be granted exceptions to the policies.

In order to make a finding on whether the Division's decision was reasonable, this matter inherently involved this Committee reviewing if and how the Division considered the evidence (facts) pertaining to the Student's mental health during Fall 2015, Fall 2017 and Winter 2018, and applied the appropriate University policies. This included an assessment of whether the Division took reasonable steps reviewing the evidence before it, and if warranted, in assembling additional evidence and documentations that are likely available on request. Although the AAC has broad jurisdiction, appeals before the AAC are not a trial *de novo*, meaning not to be a fresh trial of the evidence. However, the AAC does have a duty to consider the evidence that was before the Division, particularly when the evidence is at issue.

Prior to the Student's hearing, this Committee carefully reviewed the reasons of the committees who have denied the Student's appeals to date, the evidence as submitted by the Student with her petitions, the additional evidence the Student submitted in support of her petitions on appeal to the COS, as well as the information provided by the Division. In a virtual hearing on March 29, 2022, this Committee then heard from the Student and the Division. Both parties were self-represented.

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<sup>1</sup> Motion Decision 359-1 dated August 25, 2011, page 6

<sup>2</sup> Report # 413 dated May 10, 2021, page 8

<sup>3</sup> *Ibid*

The hearing opened with the Student speaking about her mental health dating back to high school and that she sought help from various doctors, including her family doctor and now long-time psychiatrist, Dr. J.S. Dhaliwal. She stated that she wanted to be given a fair chance when she goes out to find employment and that she doesn't want her GPA hanging over her head from grades she received when she struggled with various mental health issues.

This Committee asked the Student questions about the one 2018 course in which the Student enrolled and wrote the final exam in April 2018 (PSY210H5S, 2018(1)). The Student expressed that due to her mental health she did not believe she was able to make decisions at that time. This Committee then asked her about her mental health during the three courses she enrolled in and for which she wrote the final exams in December 2017 (PSY201H5F, 2017(9); PSY210H5F, 2017(9); PSY230H5F, 2017(9)). The Student expressed that just because she wrote the exams, it did not mean she knew what she was doing because she was mentally unwell. This Committee then asked her about her mental health during 2015 when she was enrolled and wrote the final exam for PSY100Y5Y, 2015(9). The Student explained that this was her first course at the University and that she believed that she had symptoms at that time. She explained that although her symptoms were not as severe, that she also had symptoms since high school. This Committee asked the Student if she had any evidence to support that she was medically incapacitated in 2015, to which the Student responded that she did not.

The Student described, though briefly, being mentally unwell during many of her academic years, and seeing her family doctor on many occasions, who referred her to the psychiatrist Dr. J.S. Dhaliwal. This Committee did not then press the Student to elaborate and disclose specific details about her mental health, rather it turned to the medical evidence the Student submitted with her petitions. This Committee began asking the Student questions about the VOI Form #1. The Student expressed that this was the form she was instructed to use by the Division. Of significant importance to this Committee is the fact that on the VOI Form #1, dated August 12, 2018, psychiatrist Dr. J.S. Dhaliwal indicated that the Student had a "serious" degree of incapacitation under academic functioning, that was ongoing since September 2017 with no anticipated end date. Under the "serious" category of VOI Form # 1, it lists "unable to write a test/examination" as a classification.

This Committee noted that in their Response the Division argued that the Student *failed to supply any additional supporting documentation* that would support granting an exemption from University regulations<sup>4</sup>. Specifically, that the AAS had *carefully considered* all the supporting documentation submitted by the Student and acknowledged the ongoing medical issues she experienced<sup>5</sup>. Furthermore, it was reasoned that "subsequent documents *do not provide specific enough details about how the Student's academic functioning was impaired.*"<sup>6</sup>

This Committee next opened the forum to the Division for their comments and response. The Vice Dean, Academic Experience, Professor Michael Lettieri, stated that he believed the Student's petitions were handled fairly, uniformly and in line with policies and procedures of the Division. Using the same verbiage found in the reasonings of previous committees, Professor

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<sup>4</sup> The Division's Response Submission, page 5

<sup>5</sup> *Ibid*

<sup>6</sup> *Ibid*, page 6

Lettieri argued that since the Student wrote the final exams for all courses in question, it was demonstrative of her intent to complete the courses. Professor Lettieri stated that the Student had sought academic advice since 2016, was regularly in contact with regards to her academic standing, and was “warned” to monitor her progress in terms of academic standing. The Division further argued that the medical documentation submitted by the Student did not confirm her incapacity at the time of the withdrawals, and that the Student was appealing for academic withdrawal without academic penalty because she had poor grades.

Indeed, this Committee agrees, the Student is seeking academic withdrawal without academic penalty because she received poor grades. According to the Student’s psychiatrist as found on the VOI Form #1, the Student received poor grades while having a “serious” degree of incapacitation on academic functioning, being unable to write examinations from September 2017 to at least June 2018. The issue before this Committee is to decide, based on the evidence that was before the Division and the AAS, whether denying the Student’s appeal was reasonable and fair, and ultimately within a range of possible acceptable outcomes.

The Division argued that the AAS had “carefully considered” all the supporting documentation submitted by the Student and supported the AAS’s reasoning that the dates on the documents, rather than encompassing the 2015-16 and 2017-18 academic years, postdated them. This is a factual error. The VOI Form #1 dated August 12, 2018, encompasses September 2017 to June 22, 2018. There is in fact handwriting by Dr. J.S. Dhaliwal on the VOI Form #1 indicating a start date of September 2017 with no anticipated end date. At the hearing, this Committee asked the Division why the VOI Form #1 was not considered sufficient enough to grant the Student’s petitions for Fall 2017 and Winter 2018. In response, the Division advised that because the VOI Form #1 dated August 2018 was not dated contemporaneously with April 2018 or December 2017, the periods when the Student wrote her final exams, it was insufficient. Furthermore, the Division argued that since Student’s petitions were filed in March 2021 and the VOI Form #1 was dated August 12, 2018, being not more contemporaneous with Winter 2018 and Fall 2017 terms, that the Division did not give much weight, if any, to the VOI Form #1.

This Committee then asked the Student why the VOI Form #1 was dated August 12, 2018 and not more contemporaneous with the April 2018 exam or the Fall 2017 periods. The Student explained that she was very ill, that she did not know what to do, that she had been going back and forth to her family doctor for years, that she knew she was mentally unwell, however that she did not know what was wrong with her mind and that it took several months from the date of referral from her family doctor to be seen by the psychiatrist Dr. J.S. Dhaliwal. The Student then went on to express that it can often take much longer to see a psychiatrist, that she was seen by Dr. J.S. Dhaliwal within months quite quickly and that she continues to see Dr. J.S. Dhaliwal.

Furthermore, it was reasoned at the petition level that, “according to University policy, late withdrawal without academic penalty, cannot be granted when a student writes a final examination, hence demonstrating intent to complete a course.” If this reasoning is correct, the University’s VOI Form shall never be completed after a final exam has taken place to medically attest that a student was ill during a final exam. This Committee questioned the Division if there was another University form to be used in such circumstances and the Division confirmed that there was not. The Division further advised that in certain circumstances a VOI Form can be

dated after a final exam has taken place, however more evidence is required. This Committee then sought some examples from the Division of such circumstances. The Division provided the example of a car accident. The Division advised that if a student was in a car accident, a VOI Form completed months later would likely be accepted, however there would be more evidence in addition to the VOI Form completed by a medical professional, such as from Service Ontario or the police attesting to the accident. This Committee then asked both the Student and the Division whether or not the Student was notified of any deficiencies with the VOI Form # 1 or asked to provide further medical documentation. It was confirmed that the Student was never asked to provide additional medical documentation nor was she notified of any deficiencies with the VOI Form #1. The Division also confirmed that it did not reach out to the Student's psychiatrist Dr. J.S. Dhaliwal to request additional information. This Committee then brought to the Division's attention the fact that in one of the pieces of evidence submitted by the Student in support of her petitions, Dr. J.S. Dhaliwal explicitly wrote "So, there is no confusion about such situation, if further questions needed, I could be asked by third party. I can explain more if I get response from the other party." (Dr Letter 4; April 5, 2021)

This Committee finds that there is nothing on the standard VOI Form template to indicate that where a VOI Form is dated after a relevant date, there is an onus on students to provide additional supporting documentation. Furthermore, this Committee is not aware of any University policy indicating there is a finite limited period of time by which a Student must file a petition in order to rely on an earlier dated VOI Form to seek late withdrawal without academic penalty. This Committee asked the Divisional representative, hypothetically, in the Student's case, what additional evidence would have been sufficient to meet the standard of evidence the Division would require to grant the petition. The Division advised that it would require more than the medical evidence on the University's VOI Form. In response, the Divisional representative indicated that if the VOI Form was completed closer to the final exam dates in question, then the VOI Form would be sufficient. This Committee recognizes that the VOI form was not completed on the same dates of the Student's final exams, and in fact was completed by her psychiatrist months later, however this is when she got her referral appointment. This is the form the Student was instructed to use. This Committee does not agree that it is reasonable that where a mentally unwell student having a serious degree of incapacitation attends a final exam and puts pen to paper so to speak, is therefore necessarily of the mental capacity to write the exams, or indeed even necessarily of the mental capacity to make an informed decision about whether writing the exam is a good decision in light of university academic regulations and the possible consequences.

Each level of previous committees found that the Student "did not confirm her incapacitation", the COS going further finding that the Student did not present "sufficient extenuating circumstances" and the AAS reasoned that the Student had "failed to supply *any* additional supporting documentation." It is unclear to this Committee how the medical evidence provided by the Student would be considered not supporting, did not confirm her incapacitation, insufficient, or that extenuating circumstances did not occur nor were required to be presented. It is this Committee's finding that not one of the lower-level committees reasonably and adequately considered the medical evidence before it. In none of the lower-level committees written reasons was the medical evidence, including specifically the VOI Form #1 even referenced. Nor was the supporting letter from Dr. J.S. Dhaliwal dated March 1, 2021 referenced, outlining psychiatric



consultations with the Student on June 15, 2018, and June 22, 2018. Specifically, the psychiatrist letter stated in support of the Student's petitions that, "She has paranoia and unfound hallucination which caused psychotic symptoms in April 2018, lasting for a month...Her diagnoses included depression with bipolar type 1, type 2 with psychosis and depression and psychosis." Furthermore, the June 15, 2018 psychiatric consultation letter from Dr. J.S. Dhaliwal to the Student's family doctor (Dr Letter #2) states: "She was hallucinating which means she was hearing noises and voices as if you hear a crowd talking, but do not know what they are saying. She is very clear about that and also she thought people were against her in April 2018. That lasted about a month and then it stopped and she did not get any delusions of reference and she did not have any visual hallucinations or any other hallucinations, so there are unformed hallucinations with paranoia, part of depression." At the end of the Dr Letter 2 the psychiatrist Dr. J.S. Dhaliwal made the following 'Note': "The patient said to me that right now she is suspended because her score was low. I am asking her to bring that form which is recognizing her mental health and then necessary steps should be taken to appeal the decision and also give her extra protection and some other resources to the patient." This Committee finds that Dr. J.S. Dhaliwal went even further than completing the VOI Forms but also took the time to write his support for the Student's petitions, which was unreasonably and unfairly overlooked by the Division and the AAS.

This Committee finds that the evidence relied upon by the Student from her psychiatrist Dr. J.S. Dhaliwal relevant evidence of significant weight that none of the previous levels of petition or appeal bodies correctly and fairly considered, and that accordingly the decision of the Division and the AAS was unreasonable. The Division appears to have been operating under a misapprehension about the Student's mental health, the processes and procedures around the VOI Form, how a student can have a serious degree of incapacitation, still write an exam but in the professional opinion of a medical doctor be significantly impaired. The question is not whether the Student intended to complete a course. The question is whether the Student had a serious degree of incapacitation on academic functioning, which impaired her ability to write her exams and, potentially, the ability to make conscious decisions about her academic progression and the potential consequences of relevant academic policies. Despite the Student having written the exams and the psychiatrist seeing her months later, according to the medical opinion of the Student's psychiatrist, she was experiencing a "serious" degree of incapacitation "unable to write examinations."

This Committee finds that Division as well as all other appellant committees lacked appreciation of relevant medical evidence and more particularly had complete disregard of such evidence. This Committee's decision relies heavily on the Student's University of Toronto VOI Form #1 completed by her psychiatrist, Dr. J.S. Dhaliwal on August 12, 2018 and the supporting letter dated March 1, 2021, from Dr. J.S. Dhaliwal outlining psychiatric consultations with the Student on June 15, 2018, and June 22, 2018. Of most importance, this Committee relies on and accords significant deference to the medical evidence of the Student's psychiatrist submitted on the University's VOI Form, per University procedure, in the absence of any other known alternative University form and/or procedure.

Dr. J.S. Dhaliwal is a medical professional who specializes in psychiatry. This Committee defers to Dr. J.S. Dhaliwal's medical opinion and the University's policy in place around filling out the

VOI Forms. The Student completed the VOI Forms per the University’s policy verifying the Student’s serious illness from September 2017 to at least June, 22, 2018, as indicated on the VOI Form #1. Furthermore, Dr. J.S. Dhaliwal’s psychiatric consultation letters dated March 1, 2021 and April 5, 2021, make evident his support of the Student’s appeal based on his medical expertise. “I want to make it very clear that her illness is psychiatric in nature...In my clinical opinion decline in education has caused by untreated symptoms which she is treating now. I do not see that the patient can be blamed for having symptoms. Nobody has control over these symptoms; they occur and cause significant problems in young students. She is a hardworking student, and deep consideration should be given to her diagnosis of psychiatric in nature as diagnosed by her attending psychiatrist, which I am.” These pieces of evidence are found to be most relevant to the Student’s petitions, have not been accorded the deference they deserved by all previous committees to date, and instead have been fatally overlooked.

This Committee unanimously agrees there was indeed sufficient evidence to support the Student’s petition for late withdrawal without academic penalty from Winter 2018 (PSY210H5S, 2018(1)). However, this Committee unanimously agrees that there is no medical evidence to support the Student’s petition for late withdrawal without academic penalty from 2015 (PSY100Y5Y, 2015(9)). Although not as extensive, there is also medical evidence sufficient to grant the Student’s petition for late withdrawal without academic penalty for Fall 2017 (PSY201H5F, 2017(9); PSY210H5F, 2017(9); PSY230H5F, 2017(9)). This Committee agrees that a reasonable person who carefully reviews all of the evidence, and properly accords it weight in terms of reliability and credibility since it’s from a psychiatrist, should reasonably accept that the totality of the evidence supports the conclusion that the Student was seriously incapacitated and unable to write exams during the Fall 2017 and Winter 2018 periods, per the VOI Form #1 and other supporting medical evidence. Finally, this Committee finds that if the Division thought the evidence was lacking or questionable, it was incumbent on them to request further information from the psychiatrist Dr. J.S. Dhaliwal to confirm any details on the VOI Forms, as per the policy. The fact the Division did not make such requests should not be held against the Student, when she had completed the VOI Form and provided additional medical letters from Dr. J.S. Dhaliwal.

The University’s VOI Form as stated on the University’s website at the time of this Report “is the new official University of Toronto form, replacing the Student Medical Certificate, for all students who are requesting special academic consideration based on illness or injury.” Under the FAQ section on the University’s website, two relevant questions presumably often posed by students with the University’s relevant responses are as follows:

1. ***“Why does the form not include the nature of my health problem. How can the University decide on my request for special consideration without that information?”***

In response, the University has posted: “The University respects your privacy. The most important information is whether or how your illness or injury affects your ability to fulfill your academic obligations and the time involved.”

2. ***“Do I have to see someone while I’m ill or injured? What if I’m too ill or injured?”***

In response, the University has posted: “It is important that you see your practitioner as soon as possible. The form can only be signed if you were seen at the time of your illness or injury, not after the fact. As well, the University reserves the right to confirm all details on the form, including dates.”

Accordingly, it is clear to this Committee that the University recognizes that the privacy of students is important, the VOI Form being completed by a medical professional is to serve as *the* means of deciding if a request for special consideration should be granted, that a student is to have the form completed as soon as possible, which this Committee finds the Student did given the circumstances. If there were questions around the VOI Forms, the onus was on the University to seek clarity and confirm any details on the forms, including dates.

Furthermore, at the bottom of the VOI Form, the following is stated:

**“In some appeal situations, the University may require additional information from you or your practitioner to decide whether or not to grant or confirm special consideration.”**

If the Division required further additional information from the Student or her psychiatrist Dr. J.S. Dhaliwal, there was a clear onus on the Division to request such information, not completely disregard the medical evidence it had before it. Finally, there is nothing within University policy that this Committee is aware of or that the Division could point this Committee to:

1. that indicates that a request for late withdrawal without academic penalty shall be filed contemporaneous, i.e. within the same month or year as the course was completed; nor
2. that there is a separate University form/procedure/evidentiary burden placed on students to prove their level of mental illness/incapacitation during the period of incapacitation attested by a medical professional.

To the contrary, as confirmed by the Division during the hearing, and written within University policy “Registration and Course Enrollment” under “Enrollment Limitations” and specifically under “Late Withdrawal After the Drop Date (LWD)” one of the methods acknowledged is via a petition. “Once the academic deadline for dropping a course has passed, the only method of dropping a course *without petition* (i.e., with petition is a means) is by using the LWD option online at <http://student.utm.utoronto.ca/LWD>.” The Student proceeded via petition by providing medical evidence. Her petitions ought to have been taken seriously and should not have been dismissed without regard to the medical evidence, or with no request for additional supporting information.

This Committee finds that there was insufficient medical evidence to support the Student’s petition for late withdrawal without academic penalty for PSY100Y5Y, 2015(9), and therefore

this Committee dismisses the Student's appeal with respect to that course. However, this Committee finds that it was unreasonable and unfair for the lower committees to have overlooked the Student's medical evidence for a late withdrawal without academic penalty for PSY201H5F, 2017(9); PSY210H5F, 2017(9); PSY230H5F, 2017(9); and PSY210H5S, 2018(1), and if questionable, to not follow the University's processes by failing to seek any confirmation on the details of the VOI Forms or psychiatrist letters, while deeming the totality of the medical evidence insufficient and denying the petitions. Accordingly, this Committee finds that a late withdrawal without academic penalty for PSY201H5F, 2017(9); PSY210H5F, 2017(9); PSY230H5F, 2017(9); and PSY210H5S, 2018(1) is an appropriate remedy in this case.

The appeal is allowed, in part.