

HANDBOOK FOR STUDENT PROMOTION AND GRADUATION 2026–2027

Student Evaluation, Promotion, and Awards Committee (SEPAC) HANDBOOK V25

Approved for the 2026–2027 year by SEPAC and the Academic Assembly as of 5/8/26

The policy applies to all CMS MD students, including those on approved leave of absence. It defines requirements for promotion, graduation, and academic standing.



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INTRODUCTION

SEPAC is a faculty committee that collaborates with the CMS Offices of Student Affairs and Medical Education to promote student success. It reviews academic and professional progress, ensures students meet promotion and graduation requirements, and helps guide next steps when challenges arise. SEPAC also confers student awards and commendations.

POLICY STATEMENT

LCME Element 9.9: In line with LCME standards, CMS applies one set of core advancement and graduation requirements to all medical students, regardless of location. Students in parallel curricula may have additional requirements. Any action that could affect a student's academic standing follows a fair and formal process, including timely notice, access to the supporting evidence, a chance to respond, and includes the opportunity to appeal.

PURPOSE

This handbook outlines the standards that students must meet to earn awards, be promoted, and graduate from the Chicago Medical School (CMS). It also outlines the processes in place to support student success and address academic or professional deficiencies. Additionally, it outlines the role and procedures of the Student Evaluation, Promotion, and Awards Committee (SEPAC), which oversees these decisions.

The handbook is regularly reviewed and updated. For the most current version, visit the CMS website.

The CMS Office of Student Affairs is responsible for carrying out SEPAC policies and supporting students throughout their academic journey.

PROCESS SUMMARY

Students are typically referred to SEPAC by the Office of Student Affairs when concerns arise about academic progress or professional deficiencies. SEPAC meets monthly and as needed to review such cases, taking care to gather accurate information and consider any extenuating circumstances.

Students are notified in writing of action taken by SEPAC within 10 business days. Students have the right to appeal SEPAC decisions as outlined in the [appeal section](#). Some actions, such as restoring good standing, may be handled administratively between meetings and recorded in the SEPAC minutes.

SEPAC decisions are made through a structured deliberative process:

- **Quorum:** A quorum requires one voting member over 50% of the total appointed voting faculty.

- **Deliberation:** All cases are reviewed based on documented academic and professional performance, with attention to humanistic factors and extenuating circumstances.
- **Documentation:** All decisions are formally documented in SEPAC minutes and information specific to the student is communicated to the student in writing within 10 business days.
- **Decision-Making:** SEPAC may issue outcomes including no action, remediation, academic watch, probation, suspension, dismissal, or restoration to a different status.
- **Due Process:** Students are given the opportunity to respond to concerns in writing or in person prior to any adverse action. They also receive information about how to appeal decisions, which is detailed in the [appeals section](#) of this handbook.

SEPAC'S ROLE IN APPLYING POLICY

SEPAC is responsible for applying Rosalind Franklin University of Medicine & Science (RFUMS) and CMS policy in individual student cases related to professionalism, promotion, graduation, unsatisfactory performance, adverse action, and leave of absence.

SCOPE AND APPLICABILITY

This handbook replaces all previous SEPAC Handbooks and related guidelines, including the Evaluation and Grading System/SEPAC policy and applies to all students enrolled in or on leave from the CMS Doctor of Medicine (MD) program in the 2026-2027 academic school year.

MEMBERS

SEPAC comprises at least 10 CMS faculty members, with a mix of clinical and non-clinical educators.

It also includes at least one student from each phase: M2 (second half of Phase I), Phase II, and Phase III. Students are non-voting members. They may provide input through structured, non-binding mechanisms, such as advisory input or written statements.

The Associate Dean for Student Affairs serves as a non-voting advisor to the committee.

The Assistant Dean for Student Affairs and the Executive Director for Accessibility and Academic Services, or their proxies, serve as non-voting advocates for the students.

The Phase Deans within the Office of Medical Education serve as non-voting advisors to the committee.

QUORUM

For the Committee to take action, a quorum is determined as one voting faculty member over (50%) of the total voting faculty members.

ROLES AND RESPONSIBILITIES OF SUPPORTING OFFICES AND COMMITTEES

CMS OFFICE OF STUDENT AFFAIRS

The CMS Office for Student Affairs (OSA) regularly monitors student performance and reviews concerns with SEPAC.

In addition, the OSA:

- Advises and supports students throughout the SEPAC process
- The Associate Dean of Student Affairs communicates SEPAC decisions to students
- Maintains official records of SEPAC actions
- Prepares agendas and materials for SEPAC meetings
- Reviews requests to postpone or delay a SEPAC appearance
- Ensures the accuracy of professionalism content in the Medical Student Performance Evaluation (MSPE), per CMS MSPE policy

Confidential records from the OSA are shared only with the student and designated personnel. All student records are managed in compliance with the [RFU Student Records Policy](#).

OFFICE OF MEDICAL EDUCATION

The Office of Medical Education (OME) oversees the design, delivery, and continuous improvement of the MD curriculum at CMS. OME partners with SEPAC to ensure that academic policies are applied fairly and that students receive the necessary support to meet their educational milestones. The office also provides curricular data, coordinates with course and clerkship directors, and helps implement SEPAC decisions that impact academic progression.

EARLY ACADEMIC REVIEW SUBCOMMITTEE (EARS)

The Early Academic Review Subcommittee (EARS) oversees early-stage academic concerns referred by SEPAC before they escalate into patterns of failure. EARS provides oversight, not direct academic remediation.

Function

EARS meets monthly, and as needed, to review concerns and emerging performance flags such as:

- Repeated low quiz or exam scores
- Missed deadlines or incomplete coursework
- Two remediations in an individual curricular phase
- Isolated course failures (before formal SEPAC referral)
-

Membership

EARS includes at least one voting SEPAC faculty member who serves as Chair. Additionally, the committee must consist of at least three additional voting members. The CMS Office of Student Affairs and Medical Education offers administrative support and coordinates with tutoring and academic support services.

Authority and Reporting

Students do not appear before EARS unless invited. Students may submit a written statement or participate in a check-in meeting facilitated by Office Student Affairs (OSA).

EARS does not take formal action on academic standing or adverse action. It advises SEPAC and relevant offices. Outcomes are shared with the CMS OME and the OSA. Trends may be reported to SEPAC for policy development.

Recommendations may include:

- Academic coaching or tutoring
- Time management or study skills support
- Provisional improvement plans
- Referral to wellness or personal support resources
- Continued monitoring

SEPAC PROFESSIONALISM SUBCOMMITTEE (PSC)

The PSC reviews reports of possible professional misconduct, guided by the CMS Medical Student Professionalism Policy. It does not impose disciplinary action but serves as an educational and advisory body to SEPAC.

Function

The PSC meets monthly, as needed, to review concerns and emerging professionalism flags. CMS students are responsible for completing required non-course requirements, including onboarding tasks, GPS sessions, and attestations. Failure to complete these will be reviewed on a case-by-case basis.

Membership

PSC includes at least one voting SEPAC faculty member who serves as Chair. The committee must include at least three additional members. Student members are not required to serve, but may be invited to participate in select cases and are non-voting members. Students do not review cases involving close peers. PSC works in partnership with the OME, the Professionalism Thread Director, or their designee.

Advisors and Consultative Roles

The PSC is supported by the RFUMS Office of Student Success and Wellness and the CMS OSA. The Professionalism Thread Director and Vice Dean for Medical Education (or designee) must be consulted to ensure alignment with curricular expectations and professional standards.

Referral and Jurisdiction

After an initial review, the advisory team determines whether the case should be referred to PSC, SEPAC, or the Student Affairs Judiciary Committee (SAJC). Severe or recurring cases may be referred directly to SEPAC or SAJC. When referred, records are transferred, students are notified, and review timelines are set.

Student Notification and Input

Students receive notice and may submit a written statement. PSC considers this alongside the findings to make its recommendation.

Authority and Reporting

PSC cannot impose changes to standing or progression. All PSC recommendations go to SEPAC, which may affirm, revise, or escalate the response. All final decisions rest with SEPAC or the Dean. Trends may be reported to SEPAC for policy development.

Recommendations may include:

- Professionalism coaching
- Provisional improvement plans
- Referral to wellness or personal support resources
- Assignments designed to develop professionalism
- Continued monitoring

CLINICAL SKILLS OPTIMIZATION TEAM (CSOT)

The Clinical Skills Optimization Team (CSOT) is a standing support group that provides guidance and mentorship to students who are off-cycle or who need additional development in clinical skills. CSOT supports clinical skills education in Phases I-III and helps ensure CMS graduates meet expected competencies.

Function

CSOT provides longitudinal support to students who require additional practice or structure to develop their core clinical skills. It does not evaluate students or alter their academic standing.

Membership

CSOT is composed of faculty and staff with expertise in clinical skills education, including representatives from Phases I and II and the OSA. Up to two Phase III students may serve as peer tutors.

Referral

Students may be referred by the Office of Student Affairs or the Office of Medical Education. Students may decline CSOT engagement if referred outside of SEPAC.

Student Engagement

Students who engage with CSOT meet with a faculty member to identify key skill areas for improvement. Together, they develop a tailored learning plan and schedule follow-up check-ins to ensure progress. Resources may include clinical cases, communication modules, documentation exercises, or role-playing. Students manage communication with their course or clerkship director. CSOT does not issue grades or formal evaluations.

Authority and Reporting

CSOT operates independently from SEPAC and does not issue decisions regarding academic standing or progression. When a student referred to CSOT is also under SEPAC review, SEPAC may request a CSOT summary or invite consultation to inform its decision-making.

DEAN'S APPOINTED APPEALS BOARD

Students who formally appeal a SEPAC decision related to advancement, graduation, dismissal, or other adverse action are referred to the Dean who may choose to hear the appeal, deny it or convene an hoc Appeals Board.

Function

When the CMS Dean convenes an Appeals Board, this Board is charged with reviewing whether SEPAC followed proper procedures and considering new, substantive information not previously available to SEPAC. It does not re-adjudicate the case but may recommend that SEPAC reconsider its decision.

Appeals Board Composition

The Board is composed of seven members appointed by the Dean of CMS:

- Four CMS faculty (two clinical, two non-clinical) who are not SEPAC members or affiliated with the course(s) or incident(s) under appeal. If the appeal involves all faculty, members are selected from the RFU faculty pool.
- One additional full-time faculty member (clinical or non-clinical).
- Two CMS medical students who are not SEPAC members and are neither in the same class as the student appealing, nor are close peers. Students are non-voting members.

A quorum requires at least five voting members. Only members who attend the majority of the hearing may vote on the Board's final recommendations.

AWARDS AND COMMENDATIONS

SEPAC nominates students for formal awards and commendations that reflect excellence in academics, clinical care, research, leadership, and service to the CMS and broader community. These honors are governed by criteria established by CMS, with input from the Dean or their designee. Final selection may involve other school-based or institutional committees, depending on the award.

Award recipients must be **in good standing** at the time the honor is conferred. In some cases, SEPAC may review a student's eligibility if academic or professionalism concerns arise before the award is finalized.

Nominations are grounded in CMS values, and SEPAC aims to ensure that awards are conferred fairly and reflect the contributions of our student body.

GUIDELINES FOR PROGRESSION OVERVIEW

CMS has policies that outline who manages the academic program, how grading and evaluations are conducted, and the professional standards that students must meet. SEPAC, in partnership with the CMS OSA and OME, are responsible for monitoring student progress.

When a student does not meet the required standards, SEPAC follows established guidelines to decide whether an intervention is needed and what actions are appropriate. SEPAC reviews each case in full context. If a student's academic or professional difficulty is linked to extenuating circumstances, SEPAC considers that information when making its decision.

GUIDING PRINCIPLES FOR STUDENT PROGRESSION

Where no specific CMS policies exist, this Handbook provides binding standards and procedures. The purpose of this section is to integrate policies and procedures into a set of guidelines that delineate:

- A. Grade Appeals
- B. Requirements for Academic and Professional Progress
- C. USMLE Requirements
- D. Requirements for Graduation
- E. Correcting Academic Deficiencies
- F. Professional and Ethical Deficiencies
- G. Probation, Suspension, and Academic Watch
- H. Appeal of a SEPAC Decision

A. GRADE APPEALS

Grades are assigned for all courses that count toward the MD degree. Each course or clerkship follows a grading system approved by the CMS Curriculum Committee.

If a student believes a final grade was assigned in error or not in line with published criteria, they may file a formal appeal. CMS has separate grade appeal policies.

The most current versions are available online:

- [CMS Policies Page](#)
- [Clerkship/Clinical Grade Appeal Policy \(PDF\)](#)
- [Pre-Clerkship Grade Appeal Policy \(PDF\)](#)

Note: SEPAC does not oversee grade appeals. However, SEPAC will consult with the Office of Medical Education if there is relevant information about overall academic progress or standing.

B. ACADEMIC AND PROFESSIONAL PROGRESS

Student progress to the next academic year at CMS when they meet the following criteria:

- have successfully completed all of the requirements for the current year.
- are in good academic and professional standing.
- meet CMS Technical Standards.

All students must continue to meet the [CMS Technical Standards](#) throughout their enrollment.

These standards define the physical, cognitive, emotional, and communication capabilities necessary to complete the MD curriculum and meet the expectations of the medical profession.

If a student has trouble meeting the CMS Technical Standards due to a disability, illness, or other reason, the case will first be reviewed with the RFUMS Office of Academic and Accessibility Services. SEPAC may also be involved. All accommodations must still allow the student to meet the essential requirements of the MD program.

SEPAC determines the timing for when students must meet certain progression requirements.

1. Progression to Phase II

- Phase I students** who meet all Phase I requirements and take Step 1 by the deadline set by the OME progress to Phase II and start Phase II.
- Phase I students** who meet all Phase I requirements, but do not take Step 1 by the deadline remain classified as M2 students until they do. These students
 - must enroll in an approved non-clinical M3 elective (e.g., MCUR 702) during the summer quarter.
 - are not eligible to take P2H2 III until they have sat for Step 1 and are classified as an M3.

2. Progression to Phase III

- Students may begin **non-clinical Phase III** courses before completion of all Phase II clerkships if, all the following conditions are met:
 - Step 1 is passed
 - At least 24 weeks of Phase II coursework is completed and passed

- iii. There are no Phase II clinical clerkships available due to priority enrollment for on-track Phase II students
 - iv. Students are eligible for Phase III courses approved by OME
 - v. Students have a plan approved by the OME and OSA to complete the remaining Phase II requirements
- b. Students may begin **clinical Phase III courses** before completion of all Phase II clerkships if, all the following conditions are met:
- i. Step 1 is passed
 - ii. At least 36 weeks of Phase II coursework is completed and passed
 - iii. There are no Phase II clinical clerkships available due to priority enrollment for on-track Phase II students
 - iv. The Phase III course is not in the same specialty as a pending or failed Phase II clerkship
 - v. Students have a plan approved by the OME and OSA to complete the remaining Phase II requirements
- c. Students may **remain in enrolled Phase III courses** if the all the following conditions are met:
- i. Students complete all core clerkships (Internal Medicine, Family Medicine, Pediatrics, Obstetrics & Gynecology, Psychiatry and Surgery) by December 31 of the Phase III year, assuming clinical site availability.
 - ii. Students continue to meet all other progression requirements

C. UNITED STATES MEDICAL LICENSURE EXAMINATION (USMLE) REQUIREMENTS

To progress and graduate from CMS, students must pass both:

- USMLE Step 1
- USMLE Step 2 Clinical Knowledge (CK)

Timing of Step 1

- The Comprehensive Basic Science Examination (CBSE) administered by CMS in the M2 year may be used to **determine students' Phase II clerkship track** as follows:
 - Meeting or exceeding the threshold: Students who achieve at least the minimum performance threshold, as determined by the OME in collaboration with OSA, will participate in the clerkship lottery with no restrictions
 - Below the threshold: Students who do not meet the minimum threshold will be have restrictions on their clerkship lottery
- The Comprehensive Basic Science Examination (CBSE) administered by CMS in the M2 year may be used to **determine students' Phase II progression** as follows:

- Meeting or exceeding the threshold: Students who achieve at least the minimum performance threshold, as determined by OME in collaboration with OSA, may continue onto Phase II clerkships
- Below the threshold: Students who do not meet the minimum threshold will begin Phase II on an altered track, starting with the MCUR 702 Academic Enrichment course
- Students must take Step 1 after completing the M2 curriculum and **before starting Phase II**, no later than the end of the summer quarter.
- Students who do not start clerkships in Block 1 must enroll in **MCUR 702** during the summer quarter.
- Petitions for extra time due to extenuating circumstances must go to **SEPAC**, with a recommendation from the OME designee (see Appendix B for timing).
- Students must **pass Step 1** to continue Phase II clinical activities.
- Students who have taken Step 1 and received a failing score may take P2H2 III, with permission from the Phase II team

Step 2 CK Requirement

- Students who finish all graduation requirements except **Step 2 CK** may remain in student status with SEPAC approval (Leave of Absence).
- Students who do **not pass Step 2 CK within one year** of their scheduled graduation date will be referred to SEPAC for possible dismissal or other adverse action.
- Students must take Step 2 CK within one year of completing Phase II.
- All Phase III students entering the Match must take Step 2 CK by December 31 of the Match cycle to be certified.

Exam Attempts, SEPAC Review, and Petitioning for Further Attempts

- Students are allowed **two attempts** at each exam (Step 1 and Step 2 CK).
- Students who fail either exam more than once must petition SEPAC for a third attempt.
- The SEPAC Chair, in consultation with the OME and OSA, decides if the student qualifies.
- If eligible, the student may be required to submit:
 - A brief explanation of past failures and any extenuating circumstances
 - A detailed study plan created with the Office of Student Affairs designee
 - An expected test date for the third attempt
- SEPAC may approve or deny the request during a meeting. If denied, the student is dismissed.
- The student appears before SEPAC, and may be placed on **academic watch, probation, or be dismissed**.
- **Three or more total failures** (on either Step 1 or Step 2 CK) will result in SEPAC review for possible **adverse action (including dismissal)**.

D. REQUIREMENT FOR GRADUATION

The requirements for graduation from CMS are defined in the CMS content of the RFUMS Academic Catalog.

A student can be recommended for graduation by SEPAC to the CMS Academic Assembly if the student:

- Has completed, or is scheduled to complete, all requirements for the MD degree.
- Has taken and passed all required USMLE examinations.
- Is in good academic and professional standing.
- Meets CMS Technical Standards.

E. CORRECTING ACADEMIC DEFICIENCIES

Each year, SEPAC reviews and updates guidelines for how students correct academic deficiencies. These include academic monitoring, probation, loss of good standing, and dismissal recommendations. These **guidelines** are not fixed rules. Final decisions depend on the specific circumstances of each case.

Note: CMS has a separate [Good Standing Policy](#) that includes academic, professional, and administrative standards. SEPAC uses this policy when making decisions. Students must meet **all parts** of the policy to stay in good standing.

Remediation Overview

A **failing grade** means the student did not earn enough points to pass by the end of the course or clerkship. Remediation is an opportunity to correct that deficiency through a supplemental exam or activity.

If a student **passes remediation**, the final transcript grade is recorded as **Pass (P)**.

If a student **fails remediation**, the final grade is **recorded as Fail (F)** and submitted to the Registrar.

Phase I Deficiencies: Failing Grade and Remediation

- A student with a failing grade in a Phase I course (due to exam performance or another graded component, such as Professionalism) **may be allowed** to remediate, as per the course policy.
- If a student does **not complete remediation before the course begins in the next academic year**, a final grade of **Fail (F)** will be assigned.

Note: All other details related to remediation are found in the course syllabi.

Phase I Multiple Remediations and SEPAC Review

- **Two remediations:**
Students must appear before EARS. They must work with the OSA and OME to create a written academic plan. The goal is to ensure understanding of expectations and next steps.

- **Three or more remediations:**
Students are referred to SEPAC for consideration of **adverse action**, including **possible dismissal**.

Phase II/III Deficiencies: Failing Grade and Remediation

A **failing grade** in a required educational activity or elective (e.g., a shelf exam, clinical performance, or professionalism) indicates that the student did not pass the course and must complete remediation (if available).

- CMS remediation procedures are outlined in the course syllabus or as directed by the course director (or Office of Medical Education designee).
- Remediation must follow the timeline and process defined in the course remediation policy and the [Retake Exam Policy](#).
- If the student **does not pass** remediation, the course is marked as **failed**, and a final grade of **F** is submitted to the Registrar.
- If a student does **not complete remediation before the course begins in the next academic year**, a final grade of **Fail (F)** will be assigned.

Note: SEPAC may require students to pause other courses, electives, and extracurricular activities until all active academic deficiencies are remediated.

Course Failures and SEPAC Review

Phase I Course Failures

- **One failed course:**
Students must retake the course and are eligible for referral to the EARS. Students who fail a course and have 1 remediation in another course will bypass EARS and be referred directly to SEPAC.
- **Two or more failed courses in one academic year:** The student is referred to SEPAC for consideration for **dismissal or other adverse action**. This includes:
 - Failing the same course twice (e.g., failing the remediation and the repeated version), or
 - Failing two separate courses.

If not dismissed, the student must repeat the failed courses in the following academic year, and their graduation will be delayed by one year, and they could face additional **adverse action** (e.g., placed on academic watch or probation).

Phase II and III Failures of Required Clerkships or Rotations

- **One failed required rotation (after failed remediation):**
The student must repeat the rotation and will be referred to the EARS.

- **Two failed required rotations (including two failures of the same rotation):**
Students with multiple clinical failures may be removed from further clinical activities at the discretion of SEPAC. This decision is typically made after a second failure is reported. They are referred to SEPAC for consideration for **adverse action**, including **dismissal**.

Elective Failures

- **One failed elective:**
The student must complete another elective of equivalent length.
- **Two or more failed electives:**
The student will be referred to SEPAC for consideration for **dismissal or adverse action**.

Note: When more than one remediation is combined with a failure, the student will be referred to SEPAC for consideration.

F. PROFESSIONAL AND ETHICAL DEFICIENCIES

Overview

All CMS students are expected to demonstrate professional, responsible, and ethical conduct at all times. The standards for this behavior are outlined in the [Medical Student Professionalism Policy \(PDF\)](#).

Referral Pathways

Violations of these standards may result in recommendations from:

- The SEPAC Professionalism Subcommittee
- The RFUMS Student Affairs Judiciary Committee (SAJC)
- The Student Evaluation, Promotion, and Awards Committee (SEPAC)

Students who engage in serious or repeated unprofessional behavior, violate CMS competencies, university policies, or federal, state, and/or municipal law, may be referred to **SEPAC for consideration of adverse action or dismissal**. The Dean of CMS may also escalate cases to a committee when appropriate.

In some cases, SEPAC may allow the student to remain enrolled only under specific conditions, which may include, but are not limited to:

- Participation in academic support programs
- Required meetings with the OSA or OME
- Attendance at additional meetings as directed
- Evaluation by a licensed healthcare or mental health professional to assess **fitness for duty**
- Timely response to university communications
- Restrictions on leadership or extracurricular involvement

Failure to meet these requirements may result in **dismissal** or other **adverse action**.

G. LOSS OF GOOD STANDING: ACADEMIC WATCH, PROBATION, SUSPENSION

Overview

Students lose good standing by being placed on academic watch, probation or suspension due to serious concerns related to professional behavior or ethical integrity. These statuses are not used to correct academic deficiencies, which are addressed separately under remediation and progression policies.

Definitions

- SEPAC imposes **Academic Watch** for academic, progression, professionalism or ethical concerns. It is distinct from probation or suspension and serves as a formal warning, restricting student privileges, but not constituting disciplinary action.
- **Probation** is a formal disciplinary status imposed when a student has violated behavioral standards. It allows continued enrollment under defined conditions and oversight.
- **Suspension** temporarily removes a student from all educational activities due to unresolved concerns about behavior, safety, or fitness to participate.
-

Conditions and Oversight

When SEPAC places an adverse action on a student (i.e., academic watch, , probation or suspension):

- Terms, duration, and compliance expectations are communicated in writing.
- The Committee monitors progress and determines whether the sanction is lifted, extended, or escalated.
- The sanction of **probation** and **suspension** will be noted in the student's Medical Student Performance Evaluation (MSPE).
- Failure to comply, or the continued expression of concerns may lead to dismissal.

Restrictions During Sanction

Students under any of these statuses:

- Are not considered in Good Standing
- May not hold leadership roles or represent CMS in any official capacity
- May not participate in educational activities requiring good standing verification
- May have restricted involvement in research or scholarly projects, volunteer or extracurricular activities

Suspended students are restricted from all program-related activities for the duration of the suspension.

Restoring Good Standing

SEPAC may lift a sanction when:

- The underlying issue has been addressed
- Any required actions have been completed
- The student has demonstrated sustained professional behavior

The Committee reviews the student's record before restoring Good Standing.

H. APPEAL OF A SEPAC DECISION

Students may appeal decisions related to advancement, graduation, dismissal, or other adverse actions by submitting a written request to the Dean of CMS. This must be done within **10 business days** of receiving the SEPAC decision. The appeal must be based on one or both of the following grounds:

1. New, substantive information that was not previously available to SEPAC.
2. Evidence that SEPAC procedures were not followed.

Role of the Dean

The Dean of CMS retains final authority over all SEPAC-related appeals. The Dean may either review the appeal directly or appoint an **Appeals Board** to conduct a hearing and provide a recommendation. While the Dean will consider the Appeals Board's recommendation, the Dean is not obligated to follow it.

Appeals Heard by an Appeals Board

If an Appeals Board is convened, it must:

- Meet and hear the appeal within **30 business days** of the student's written request.
- Focus on whether SEPAC procedures were followed and whether new, substantive information merits reconsideration.
- Not substitute its judgment for SEPAC's original academic or professional determinations.

Appeals Board Composition

When convened, the Appeals Board includes seven members appointed by the Dean: five faculty (none from SEPAC or directly involved in the case) and two CMS students who are neither in the appellant's class, nor close peers. A quorum of five is required, and only members who attend the majority of the hearing are eligible to vote.

Student Rights in the Appeal Process

Students have the right to:

- Review and copy their academic record per RFU policy.
- Appear live to present their appeal and provide supporting materials (e.g., documents, exhibits, affidavits).

- Call witnesses or submit supporting letters. Witnesses can only respond to questions and are not permitted to engage in open discussion.
- Be the sole person presenting their case (no legal or third-party representatives allowed).
- Be informed of the evidence considered by the Appeals Board.

The **Chair of the Appeals Board** is elected by its members and leads the hearing. A **Secretary** is also elected to take minutes and prepare the final report. The Chair of SEPAC provides a written summary of the SEPAC decision and rationale for the Appeals Board review.

The **Associate Dean for Student Affairs** (or designee) may be present during the evidence portion of the hearing to provide requested information. Witnesses are present only during their testimony. Only Appeals Board members may be present during deliberations.

Outcome and Timeline

- The Appeals Board must submit a written recommendation to the Dean within **seven business days** of the hearing.
- The recommendation must be based solely on the new evidence presented.
- The Board may recommend one of two actions:
 - Uphold SEPAC's decision.
 - Request that SEPAC reconsider its decision.
- The Dean will issue a final decision within **10 business days** of receiving the Board's report and communicate it in writing to the student, SEPAC, and the Associate Dean for Student Affairs.
- If the appeal is granted, SEPAC will review the new information shared with the Appeals Board and the Board's justification.

NEW MEMBER ORIENTATION

Upon appointment to SEPAC, new members will receive a copy of the current Handbook for Student Promotion and Graduation. The Chair will schedule individual orientation sessions for each new committee member prior to the next scheduled SEPAC meeting. Orientation will cover SEPAC policies and procedures, confidentiality, expectations, and training. The Chair has the discretion to discuss additional orientation materials as needed.

CONFLICT OF INTEREST AND RECUSAL

Any SEPAC member who has a real or perceived conflict of interest related to a student's case must:

1. Inform the SEPAC Chair.
2. Recuse themselves from discussion and voting on that case.

Conflicts of interest may be personal, professional, or relational, including but not limited to:

- Serving as the Course or Clerkship Director involved in the adverse action

- Prior or current advising, mentoring, or advocacy for the student
- Close friendships, family ties, or known disputes with the student
- Any other circumstance that could affect, or appear to affect, a member's ability to make an impartial decision

STUDENT MEMBERS

Student members of SEPAC are held to the same expectations of impartiality.

They must recuse themselves from any case involving a peer with whom they have a close personal relationship, direct conflict, or any interaction that could impair objectivity or undermine the integrity of the process.

This may include, but is not limited to: classmates from the same learning community, schema group, roommates, long-standing social connections, or involvement in peer leadership, advocacy, or grievance resolution with the student under review.

The SEPAC Chair may initiate a recusal at any time if a conflict is known or suspected, regardless of self-disclosure.

Failure to report a conflict may result in disciplinary action, including removal from SEPAC. All recusals are documented in the official SEPAC meeting minutes.

CHAIR-SPECIFIC CONFLICTS

The Chair of SEPAC is a voting member and serves as the presiding officer. If the Chair has a conflict:

- They must disclose it to the Committee.
- By default, the Chair will be recused from voting but may continue to preside over the meeting.
- A full recusal (from voting and presiding) may be initiated by the Chair or determined by committee vote.
- In cases of full recusal, the Committee will elect a temporary Chair to facilitate the meeting.

LEAVE OF ABSENCE (LOA)

Students may need to step away from school for medical, personal, academic, or professional reasons. The process is outlined in the [RFUMS Leave of Absence Policy](#), which is available in the Academic Catalog.

Key points:

- Students can request a voluntary LOA through the CMS Office for Student Affairs.
- SEPAC can place a student on a mandatory LOA if there are serious academic, professionalism, health, or personal concerns.
- Every LOA must include:

- a return date
- required documentation
- conditions for return
- An LOA does not reset a student's academic or professionalism standing. If a student was on probation or academic watch prior to the LOA, that status continues, unless SEPAC decides otherwise.
- If necessary, students must request to extend their time-to-degree if they will exceed CMS's time-to-degree limits, even if they have taken one or more LOAs.

DISMISSAL BY SEPAC

Through the use of academic judgment, SEPAC considers for dismissal students who have not achieved the appropriate level of progress, have failed to meet the appropriate academic or professional standards, do not meet CMS Technical Standards, or are deemed, for just reason, unfit to continue at CMS. The conditions that fulfill these criteria are any one of these, but not limited to:

1. Two or more course failures over Phase I.
2. Two or more course failures over Phase II.
3. Multiple remediations of coursework (as outlined in the remediation section).
4. Repeat failure of the same required coursework or clinical rotation.
5. Failure of multiple electives during the duration of the program, including repeated failure of the same elective.
6. Failure to appear at a SEPAC hearing after notification.
7. Failure to adhere to agreed-upon terms for continuation after a SEPAC determination.
8. Academic struggles, defined as poor performance on exams, in the assessment of competencies, or the need for remediation, occur repeatedly across different courses or clinical rotations, even if it does not lead to Failure in any course or clinical rotation.
9. Insufficient performance in developing and maintaining the standards of ethical integrity, professional judgment, or reliability in personal relationships essential to the competent, honest, responsible practice of medicine.
10. Failure to comply with the terms and conditions of a loss of good standing (i.e., academic watch, probation, or suspension" within the time period specified, or an additional instance of unprofessional or unethical behavior while under any of these statuses.
11. Difficulties requiring a student to lose good standing, be placed on probation, or be suspended after the student has had any of these statuses before.
12. Not passing USMLE Step 1 or Step 2 CK exams on two attempts each; failing any combination of Step 1 or Step 2 CK three times; not sitting for Step 1 within 1 year of the end of the Clinical Skills course, not sitting for Step 2 CK within one year of the end of Phase II, or not completing Step 2 CK requirements by one year from the scheduled date of graduation.
13. Not satisfactorily meeting all the requirements of Phase I within 36 months (3 years) of the first date of registration as a beginning medical student. Leave periods are reviewed on a

case-by-case basis and should not exceed the limits outlined in the RFUMS LOA Policy. Approved research and graduate study leaves do not count towards this maximum.

14. Not satisfactorily meeting all of the requirements of Phase I-II within 54 months (4.5 years) of the first date of registration into CMS as a beginning medical student. Leave periods are reviewed on a case-by-case basis and should not exceed the limits outlined in the RFUMS LOA Policy. Approved research and graduate study leaves do not count towards this maximum.
15. Not satisfactorily meeting all of the requirements for graduation with the MD degree within 72 months (6 years) of the first date of registration into CMS as a medical student. Leave periods are reviewed on a case-by-case basis and should not exceed the limits outlined in the RFUMS LOA Policy. Approved research and graduate study leaves do not count towards this maximum.

WITHDRAWAL

RFUMS permits separation from the University through voluntary, involuntary, or hardship withdrawal or dismissal. Students who voluntarily withdraw must submit a formal request to the OSA's designated representative.

If the request is approved after the Add/Drop period, the grade assigned for each course will follow University withdrawal policies and can vary based on the timing of the request. Students can not return in the same term and must reapply for admission.

The University can initiate involuntary withdrawal due to academic, financial, or conduct-related concerns. Students are notified in writing and have the opportunity to appeal to the Dean of Students. Supporting documentation is required, and approval is determined by university offices.

Any student who is eligible for dismissal or other adverse academic action (e.g., probation) must submit a withdrawal request prior to the start of the SEPAC hearing. Withdrawal requests submitted after a hearing has begun will not supersede SEPAC's decision. Dismissals are recorded on the transcript, and students can appeal through formal procedures.

APPENDIX A: REFERENCES AND RELATED POLICIES

The most current versions are available online:

- [RFUMS Academic Catalog](#)
- [CMS Grading Policy](#)
- [Technical Standards](#)
- [Pre-clerkship Absence Policy](#)
- [Pre-clerkship Grade Appeal Policy](#)
- [Clerkships and Clinical Rotations](#)

- [Pre-Clerkship Courses](#)
- [Clerkship Absence Policy](#)
- [Clerkship Grading Policy](#)
- [Clinical Grade Appeal Policy](#)
- [Retake and Rescheduled Exam Policy](#)
- [Medical Student Professionalism Policy and Procedures](#)
- [RFU Student Handbook](#)
- [Medical Student Professionalism Policy](#)
- [Exam Conduct Policy](#)
- [Excused Absence Policy](#)
- [Clerkship Excused Absence Policy](#)
- [Clerkship Retake/Rescheduled Exam Policy](#)
- [CMS Clerkship Exam Failure and Missed Exam/Clinical Experience Policy](#)
- [Clinical Grade Appeal Policy](#)
- [CMS Good Standing Policy](#)

SEPAC does not oversee grade appeals. However, unresolved disputes can occasionally intersect with broader academic progress concerns reviewed by SEPAC.

APPENDIX B: USMLE STEP 1 EXCEPTION REQUEST

All students must sit for their first attempt at USMLE Step 1 by the end of the summer quarter, after completing Phase I. Extensions should be rare and granted only for valid reasons defined below.

Students must submit:

- A written request explaining the reason, timeline, steps taken, and proposed new test date
- Supporting documentation (e.g., doctor's note, ADA letter, obituary, etc.)
- A required memo of support from an advisor, learning specialist, or Assistant Dean for Basic Science Education confirming the student is engaged in support and planning

Valid Reasons Include:

- New or worsening health condition
- Ongoing ADA accommodations process
- Major unexpected life event
- Institutional or instructional disruption in MCUR 702
- Severe weather, natural disasters, or other confounding circumstances outside the student's control

Invalid reasons include:

- Low practice exam scores
- Wanting more study time

The deadline to apply is three weeks before the Step 1 summer deadline and SEPAC reviews all requests. Students can be invited to speak with SEPAC and will receive a written decision.

Students who miss the deadline to sit without approval can be reviewed for Professionalism, placed on involuntary leave, or considered for dismissal.

APPENDIX C: PROFESSIONALISM REMEDIATION PROCESS

This process offers a structured, student-centered approach to address professionalism concerns in a way that supports growth while upholding the standards required for clinical training.

When professionalism concerns arise, SEPAC may invite the student to collaborate on an individualized development plan (IDP) with defined goals, actions, and timelines. The plan may include mentorship, reflection, workshops, or other appropriate interventions.

Progress is monitored with input from the Office of Medical Education and the Office of Student Affairs, including relevant thread or competency leads. In some cases, additional guidance may be sought from faculty with expertise in professionalism or clinical education.

SEPAC reviews the completion of the plan. Persistent or unresolved concerns may result in formal actions such as loss of good standing, probation, or dismissal, per CMS policies.