



**STATEMENT IN SUPPORT OF APPEAL**  
**MWSU Admission and Graduation Committee**

The appeal process is reserved for those students who have extenuating circumstances which exist and are making a request outside of university policy.

Last Name	First Name	G Number (or ssn)

Street Address

City	State	Zip	Telephone Number

**Purpose of appeal (please mark one and complete description):**

Request for a late withdrawal ("W" assigned). Specify semester(s) and course(s).  
\_\_\_\_\_  
\_\_\_\_\_

Request for a late drop (no grades on transcript). Specify semester(s) and course(s).  
\_\_\_\_\_  
\_\_\_\_\_

Request for transfer course(s) to count as general studies credit (course description and syllabus must be included for each request). Specify the following –  
General Studies Category and Group \_\_\_\_\_  
Course(s) \_\_\_\_\_  
School at which course(s) were attempted \_\_\_\_\_

Other request (briefly explain) \_\_\_\_\_

Please include a letter of explanation or complete the back of this form describing your request in more detail and why you believe an exception to MWSU policy should be made.

Documentation which supports your extenuating circumstances **must** be attached. Examples include medical documentation, notice of death in family, letter from employer, letter from MWSU academic department or advisor, etc.

I have submitted documentation which supports my appeal.

I approve release of my full appeal to the Business Office should I choose to request a refund.

I hereby acknowledge that everything which has been presented in this appeal and accompanying documentation is true and accurate.

Signature	Date
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