ADMISSION APPEAL FORM

This form may be completed by first-time freshmen who have been denied admission to the University.
Transfer students should complete the Transfer Admission Appeal Form.
Remember to attach all appropriate documentation in support of this appeal.

Name: _____
        Please print.

Student's signature: _____

EKU ID: _____ Date of Birth: _____ Day phone: _____

Current home mailing address: _____

_____

Email: _____
        The Office of Admissions will only send student record information to your secure EKU email address.

Please check the box next to the term you wish to enter EKU and indicate the year:

☐ FALL 20_____   ☐ SPRING 20____   ☐ SUMMER 20____

**Respond to each of the following in the space provided or on additional paper, if necessary.
Remember to attach all appropriate documentation to support this appeal.**

A. **Intended Major:** If you were to be admitted, which degree program will you consider? (*Note: As a condition of your admission, you may be restricted in the number of hours you are allowed to take, or specifically instructed to take certain classes, and/or required to meet with a specified advisor to develop a Student Success Plan and sign a Student Success Agreement.*)

B. **Justification for Appeal:** Write a well-organized explanation analyzing the reasons for your poor academic performance in high school and/or your low ACT scores. Please be certain to describe extenuating circumstances in detail. Please attach documentation in support of your appeal as appropriate.

C. **Additional information**: Feel free to elaborate on any of your answers or to provide the committee with additional information you feel is important for us to have in order to give your petition full consideration. Please be certain to describe extenuating circumstances in detail. Please attach documentation in support of your appeal as appropriate.