

# Academic Appeal Form

For instructions visit [boisestate.edu/registrar/student-forms/academic-appeal-form](http://boisestate.edu/registrar/student-forms/academic-appeal-form)

## 1. Student Information

USE BLACK OR DARK BLUE INK ONLY

First Name \_\_\_\_\_ M.I. \_\_\_\_\_ Last Name \_\_\_\_\_ Student ID number (or SSN if unknown) \_\_\_\_\_

Mailing Address (note: this address will be used to update our records) \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

Daytime Phone Number \_\_\_\_\_ Broncomail or Preferred Email Address \_\_\_\_\_ Expected Graduation Date \_\_\_\_\_

Declared Major \_\_\_\_\_ International Student  Student Athlete  Student Housing  Eligible Veteran   
(Please check all the boxes above that apply)

### Mark the Category of Your Appeal

#### Adding a Course

Attach a *Registration Override Form* with instructor's signature. Financial aid may not be available

#### Complete Withdrawal (CW for the semester)

Be aware that this could impact your financial aid  
Forward to Fee Appeals Committee for consideration

#### Dropping a Course (W for a class)

Regular Session—after classroom instruction ends  
All other sessions—after the end date of the session  
Be aware this could impact your financial aid.

Forward to Fee Appeals Committee for consideration\*  
\*See [documentation requirements for fee appeals](#).

#### Change Credit to Audit OR Audit to Credit

Attach instructor permission on Registration Override Form. Be aware this could impact your financial aid.

#### Academic Adjustment eForm

Requires Academic Adjustment eForm submitted by you or your advisor via [Student Forms](#).

#### Other (please explain)

2. Semester and Year (check one, write the year) Fall  Spring  Summer

3. Course Information For complete withdrawals, **DO NOT** list courses.

5-Digit Class Number	Subject and Catalog Number (e.g. ENGL 102)	Section (e.g., 001)	Credit Hours	Session (e.g., Regular, 1 <sup>st</sup> 7-week, etc.)

#### Registrar's Use Only

Last day to Add w/o#:	Last Day to Add w/#:	Last Day to Drop w/o W:	Last Day to Drop or CW:

## 4. Attach your typewritten request with justification and documentation to this cover sheet.

Check the following documents that are included with your appeal:

- |                           |                          |                        |
|---------------------------|--------------------------|------------------------|
| Student Letter (required) | Military Orders          | Other (please explain) |
| Academic Adjustment eForm | Obituary/Funeral Program |                        |
| Medical Records/Report    | Override Form            |                        |
| Support Letters           | Police Records           |                        |
|                           | Telephone Records        |                        |

I have read the appeals information and procedures on page one. I have attached my letter of explanation, which is limited to one typed page, and have included pertinent documentation.

Student Signature (required) \_\_\_\_\_

Date \_\_\_\_\_

**Important: make a copy for your records**

#### Registrar's Use Only

Contact made or comments:
<input type="checkbox"/> Pending <input type="checkbox"/> Approved <input type="checkbox"/> Denied <input type="checkbox"/> No Action Taken <input type="checkbox"/> Sent to Fee Appeals <input type="checkbox"/> DOS Referral