

UNDERGRADUATE ADMISSIONS APPEAL REQUEST**APPLICANT INFORMATION**

SDSU RedID: _____ Date: _____

Applicant Name: _____
*Last First Middle Maiden*Mailing Address: _____
Street City State Zip

Email: _____ Daytime Phone: _____

Term: Fall _____ Spring _____ Major: _____
*Year Year***ENTRY STATUS**

How many college transferable semester/quarter units will you have completed at time of entry/re-entry into CSU (include units in progress and planned)? Select your entry status: _____

REASON FOR APPEAL

Please select reason for your appeal and review the list of required supporting documentation that must accompany your appeal at www.sdsu.edu/appeals before submitting your request. You must submit **ONE COMPLETE PACKAGE** that includes this Admission Appeal Request form, letter of appeal detailing your extenuating circumstance (e.g., hospitalization, military service, family crisis), and supporting documentation that substantiates your appeal. You must document your extenuating circumstances. **Only complete appeals will be considered.** Do not submit letters of recommendation or copies of awarded honors.

CHECK ONE BOX BELOW TO INDICATE THE REASON FOR THE APPEAL**Missed Deadline Appeal**

- Request to submit late admission application
- Request to submit late fee
- Request to submit late transcripts, documents, or test scores
- Request to apply as a Lower Division Transfer student
- Request to submit a late Intent to Enroll
- Request to have the application rolled over to a future term, Fall _____ or Spring _____
- Other: _____

Admission Decision Appeal

- Request for a re-evaluation of denied admission
- Request for reinstatement of admission. Admission was canceled or rescinded
- Other: _____

APPEALS INSTRUCTIONS

1. All appeals must be received by SDSU within 30 days of date of the "missed deadline," or "deny" notification/communication from the SDSU Office of Admissions. **Students who are appealing their denied status may only submit one appeal per admission term.**
2. Appeal decisions will be provided within 6-8 weeks after the submission of a **complete** appeals package. **Note:** Depending on the volume of appeals received by the Office of Admissions, appeal decisions could exceed 8 weeks.
3. Applicants will be notified of the appeals decision by mail using the address on file in the SDSU Office of Admissions or the mailing address noted on the Admissions Appeal Request form. To confirm or update your mailing address, please go to www.sdsu.edu/portal.
4. Complete the Undergraduate Admissions Appeal Request form and appeal letter along with supporting documentation (e.g., hospitalization, military service, family crisis) that substantiates your appeal.
5. Review Admission Appeals Process website at www.sdsu.edu/appeals and follow instructions for selected appeal type. Official transcripts and test scores may be required. All transcripts and test scores must be sent directly to the SDSU Office of Admissions and must be received within **three weeks** of submission of admission appeal request form, otherwise appeal will be withdrawn and no longer considered.
6. Mail the complete appeals package with supporting documentation (refer to www.sdsu.edu/appeals) to:

University Admissions Appeals Committee
Office of Admissions
San Diego State University
5500 Campanile Drive
San Diego, CA 92182-7455

By signing below, I acknowledge that I have read the instructions above and that all required documents/transcripts/test scores must be received in the SDSU Office of Admissions within the next three weeks or my appeal will be withdrawn and no longer considered.

Applicant Signature: _____ Date: _____

(Continued on next page)

APPEAL LETTER: PLEASE INCLUDE OFFICIAL LETTER OF APPEAL IN THIS SECTION

Please type in letter or copy text from a Word document into this box.

OFFICE USE ONLY

Date Received: _____

Freshman

Lower Division

Upper Division