STUDENT PLACEMENT APPEAL FORM – Fall 2017

Name: ___________________________ WID: ___________________________
   Family Name       First Name

Email: ___________________________ Date: ___________________________
   (KSU Email)

Major ___________________________ Degree B.S./ B.A. _______ M.S./ M.A. _____ Ph.D. _____

Level student placed in now: __________________________________________

Change requested: _____________________________________________________

Reason: ______________________________________________________________

Lines below for ELP Office Use ONLY

ACTION TAKEN & REASONS (+ comments)

THIS FORM IS DUE BY Tuesday, January, 2, 2018 BY 5:00P.M.
   Central Time (KANSAS time).