

Transfer Appeal Form

The Admission Appeals Committee will review an appeal once all required information has been received by the Office of Admission. All appeal materials must be received **30 days prior** to the start of classes for the term for which admission is requested. Appeals received after this deadline cannot be guaranteed a review.

Name: _____

Current Address: _____

City, State, Zip: _____

Date of Birth: _____

Daytime Phone: _____

Email: _____

Semester you applied to enter: Fall Spring Summer Year _____

Letter of Explanation

Submit a letter that explains why you feel you could be successful at North Dakota State University, although your previous academic record does not meet admission requirements. Please attach a separate sheet and include your name on each additional page.

Suggested topics to cover in the Letter of Explanation

- Why are you interested in attending North Dakota State University?
- Explain any extenuating circumstances that you feel warrant additional consideration.
- Describe, using supporting evidence, how you are academically prepared to be successful at NDSU.
- What additional information should the Admission Appeals Committee know when considering your appeal?

SIGNATURE REQUIRED

I understand that my appeal will be reviewed after the Transfer Appeal Form and my Letter of Explanation have been received by the NDSU Office of Admission. I understand that submitting an appeal does not guarantee admission to NDSU and that my request for reconsideration will be determined by the Admission Appeals Committee.

Signature

Date

Mail completed form and attachments to:

Office of Admission
Dept. 2832, PO Box 6050
Fargo, ND 58108-6050

For Office Use Only

EMPL ID: _____

Date Received: _____