



**Instructions:**

1. Complete the form justifying your reasons for appealing. Please include as much information as possible, including dates, and any documentation you have that supports your claim. Be specific about what you are requesting. The more information you provide the better. Failure to provide a written statement and/or documentation may affect our decision. Return all material to the Student Services Center.
2. Your request will be processed in the order it is received. **Allow at least one week for processing.**
3. The appeal will be reviewed by the Associate Registrar. If denied by the Associate Registrar, a 2<sup>nd</sup> appeal may be made to the University Registrar. The decision of the University Registrar is final.
4. The decision and any correspondence will be emailed to your FSU student email address.

**Important Notes:**

1. If you are requesting to drop/withdraw a course after the deadline, please be aware that never attending a course, not being aware of the drop date, and thinking that you attempted to drop a course are not justifications that are automatically approved. FELiX records all attempts to drop a course whether successful or not.
2. Approval of your request may affect your financial aid and scholarship eligibility for the current term as well as future terms. In addition, it may result in a payment due to the institution. Payment may be required before the approved appeal can be processed. Please consult with the Financial Aid Office before you submit this form.
3. This form is not to be used for SAP (Satisfactory Academic Progress) appeals. If you have not met your SAP for financial aid, you must complete the SAP appeal form.
4. This form is not to be used for grade appeals. If you are disputing a grade you received from a professor, an appeal must be submitted to the Provost.

**Student Information:**

Student Name \_\_\_\_\_ ID Number \_\_\_\_\_

FSU Email \_\_\_\_\_

- By signing the form, I am verifying that all information submitted with the form is true and accurate.

Signature \_\_\_\_\_ Date \_\_\_\_\_

**Appeal Information:**

Fall \_\_\_\_\_ Spring \_\_\_\_\_ Summer \_\_\_\_\_ Year: \_\_\_\_\_

