

PETITION FOR APPEAL
COLLEGE OF EDUCATION AND HEALTH PROFESSIONS
GRADUATE COUNCIL

Refer to the on-line [CSU Catalog](#) for current information regarding Graduate Academic policies.

REQUIRED DOCUMENTATION:

- _1. Letter from petitioner clearly stating the reason for the appeal and/or exception to existing academic rules or regulations; and
- _2. Letter of statement including recommendation concerning the appeal from the Program Coordinator of study

OTHER DOCUMENTATION:

- _2. Letter of support or affirmation (e.g., Department Chair, advisor, or college instructor/faculty member); and/or
- 3. Other relevant documentation.

COVER INFORMATION/SIGNATURES:

Petitioner's
 Name: _____
 Mailing Address: _____
 Email: _____
 Telephone Numbers: (W) _____ (H) _____
 CSU Student Identification Number (909****): _____
 Program of Study/Degree: _____

All information is complete and correct:

Petitioner's Signature Date

Submit the completed form and appropriate documentation to your Department Chair

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| <u>Kinesiology & Health Sciences</u> | <u>School of Nursing</u> | <u>Counseling</u> |
| Dr. Clayton | Dr. Tamara Condrey | Dr. Deniz Peker |
| Nicks | condrey_tamara@columbusstate.edu | peker_deniz@columbusstate.edu |
| nicks_clayton@columbusstate.edu | <u>Teacher Education, Leadership, and</u> | |

Chairs, please forward the completed form and documentation to the current Chair of the COEHP Graduate Council