



## Administrative Appeals Request

**NOTE:** Appeals must be submitted within one year from the end of the term that is in question.  
 (For example, if a student wishes to appeal an issue from spring 2015, the student has until the end of spring 2016 to submit an appeal for review).

Name: \_\_\_\_\_ Semester Appealing: \_\_\_\_\_

Student ID #: \_\_\_\_\_ Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Is this a second appeal to a prior Administrative Appeals Request? Yes \_\_\_ No \_\_\_

**NOTE:** Second Appeal requests must be received within 90 days from the date on your first Administrative Appeal Denial letter.

Describe administrative policy that was misapplied:

What remedy are you seeking (by course):

Your rationale:

Additional information:

Please be sure to attach any supporting documents regarding this appeal.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
*Must be signed by student*

Print the original document and submit by email, mail, deliver or fax to:

ADMINISTRATIVE APPEALS COMMITTEE  
Robert D. Orr Center, Room 1038  
Enrollment Management  
8600 University Boulevard  
Evansville, IN 47712  
usi1adappeal@usi.edu  
Fax: 812-464-1797

**FOR OFFICIAL USE ONLY:**

Date Appeal Received: \_\_\_\_\_ Date Presented to Committee: \_\_\_\_\_

Appeal Outcome:     APPROVED     DENIED    First Term: \_\_\_\_\_ Appealing Term: \_\_\_\_\_

Additional Information: \_\_\_\_\_