

THE GRADUATE SCHOOL • VALDOSTA STATE UNIVERSITY
ADMISSION DENIAL APPEAL FORM

NAME _____	DATE _____	
ADDRESS _____	PHONE _____	
CITY _____	STATE _____	ZIPCODE _____
STUDENT #ID _____	MAJOR _____	
(0 \$, / _____		

BR ,EFLY EXPLAIN REASON FOR APPEAL: _____

678'(17)RUZDUG WR WKH *UDGXDWH 3URJUDP &RRUGLQDW

