WKU THE GRADUATE SCHOOL

Appeal of Graduate Policy

1906 College Heights Blvd. #11010 | Bowling Green, KY 42101-1010 | Phone: 270-745-2446 | Fax: 270-745-6950 | graduate.records@wku.edu

Name _____ _____ _____ WKU ID # _____
Last First M/M

Program Name/Number _____

GRADUATE POLICY Cite the policy title and relevant details as published in The Graduate Catalog, as well as the request for the appeal.

STUDENT RATIONALE Provide rational for this exception. Attach relevant support documentation such as course syllabi, etc.

PROGRAM FACULTY RATIONALE Provide rationale for this exception for this student.

_____
Projected Degree Completion Date

_____	_____	_____	_____
Student Signature	Date	Graduate Program Coord or Dept Head Signature	Date
_____	_____	_____	_____
Advisor Signature	Date	College Dean Signature	Date

Graduate School Director Comments:

☐ **Approved** ☐ **Denied**

_____ _____
Executive Director for Graduate Studies Date