



# CALIFORNIA STATE UNIVERSITY, FULLERTON

## TRANSFER STUDENT ADMISSION APPEAL COVER SHEET OFFICE OF ADMISSIONS

Applicant Name: \_\_\_\_\_ CWID: \_\_\_\_\_ Fall Spring  
 (CIRCLE TERM)  
 CSUF E-mail: \_\_\_\_\_ Phone: \_\_\_\_\_

Submit the following documents in ONE COMPLETE PACKAGE. Only **complete** appeals will be considered. Review the appeals website for additional information: <http://www.fullerton.edu/admissions/appeals>  
 READ APPEAL DIRECTIONS COMPLETELY.

- 1) **Transfer Appeal Cover Sheet** – Complete and sign form.
- 2) **Letter of Appeal** – Address extenuating circumstances supporting appeal. Must be prepared by the applicant. Include your current GPA.
- 3) **Documentation** – Supply documentation for all facts presented in your letter of appeal.
- 4) **Transcripts** – Supply copies of official or unofficial transcripts for all colleges/universities attended.

### Appeal Category:

- |  |   |
|--|---|
| <input type="checkbox"/> Admission Application Fee       | <input type="checkbox"/> College Transcript(s)                      |
| <input type="checkbox"/> Acceptance of Offer             | <input type="checkbox"/> Enrollment Deposit                         |
| <input type="checkbox"/> Transfer "Golden 4" Requirement | <input type="checkbox"/> Transfer Less than 60 Units                |
| <input type="checkbox"/> Transfer GPA                    | <input type="checkbox"/> CSUF GPA less than 2.0 (units in progress) |
| <input type="checkbox"/> Other _____                     | <input type="checkbox"/> Transfer AA-T or AS-T Degree               |

- 1) All appeals must be **received** by the CSUF Admissions Appeals Committee **within one month** of date on the admission status notification from the Office of Admissions.
- 2) Appeal decisions will be provided within 3-4 weeks of submission.
- 3) Applicants will be notified by e-mail to their CSUF email address.
- 4) Submit complete packet by one of three ways.

**MAIL to:** California State University, Fullerton  
 Admissions Appeals Committee  
 P.O. Box 6900  
 Fullerton, CA 92834-6900

**FAX to:** (657) 278-1152

**EMAIL to:** [appeals@fullerton.edu](mailto:appeals@fullerton.edu)

I certify that I have read the Admissions Appeals Information (web address above) and have submitted a complete packet (form, letter, documentation, and transcripts). I understand that if my appeals packet is incomplete, my appeal may be delayed or immediately denied.

Form 9/26/16

Applicant Signature \_\_\_\_\_

Date \_\_\_\_\_

### OFFICE USE ONLY

Rec'd \_\_\_\_\_ GPA \_\_\_\_\_ Mjr \_\_\_\_\_ Local/Out \_\_\_\_\_ Return \_\_\_\_\_ Comment \_\_\_\_\_

Stat/Dte \_\_\_\_/\_\_\_\_ ADT \_\_\_\_\_ Date/Content Emails \_\_\_\_\_

Appeal Status
Approved
Denied
No Action

Notes/Comments \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Action	
APPL	ADMT
WAIT	PEND
MATR	DDEF-

Decision: By \_\_\_\_\_ Date \_\_\_\_\_ Email \_\_\_\_\_ Com \_\_\_\_\_ Stat \_\_\_\_\_