

KANSAS WESLEYAN UNIVERSITY

Office of the Provost, PH285 | 100 E. Claflin Ave., Salina, KS 67401 | 785-827-5541 Ext. 1280

PETITION TO THE PROVOST

Student's Name _____
Last First MI ID# or SS#

_____ _____ _____ _____
Street Address City State Zip

(____) _____ (____) _____ _____
Daytime Phone Number Additional Daytime Number Date of Petition

Appeal Category: Grade Dismissal¹ Academic Dishonesty Other

Please attach, on a separate sheet, a statement describing in detail what outcome of the petition is desired. Provide enough information for the Provost to understand the rationale for the petition. Attach documentation necessary to support the petition.

Student's Signature _____ Date: _____

UNIVERSITY USE ONLY

(Please Attach Any Comments Pertinent to this case)

Advisor Signature _____ Date _____
Agree Disagree

Coach Signature _____ Date _____
(If Applicable) Agree Disagree

Registrar _____ Date _____
(If Applicable) Agree Disagree

Director of Student Life _____ Date _____
(If Applicable) Agree Disagree

Provost _____ Date _____

Final Action: Approved Denied

RETURN THIS FORM TO THE PROVOST'S OFFICE, PIONEER HALL ROOM 130*

¹ To contest academic dismissal, students should complete a Satisfactory Academic Progress Appeal form. Students may petition the provost for other types of dismissals.