



Admission Appeal Cover Sheet

APPLICANT: If you are an undergraduate (freshman or transfer) applicant, download and complete **this form**. Then submit it in **one packet** together with your **letter of appeal** and **supporting documents**. Mail the completed packet to Admissions and Records or deliver in person (see office location and address above). See page 2 for instructions. **Please print clearly.**

Your letter of appeal must explain the basis for your request and describe **(1)** how you meet the admissions criteria, or **(2)** how an extenuating circumstance (e.g., military service, family crisis) prevented you from meeting a deadline.

Documents to support your appeal might include proof of mailing/submitted information, court documents, etc. All documents submitted will be kept confidential. Read more at www.csun.edu/admissions-records/admission-appeals

Name: _____ CSUN ID (9-digit):

Email:* _____ Phone: _____

*We will email our response. Please verify that the email address above appears in your myNorthridge Portal account. Log into myNorthridge with your CSUN user ID and password, select the "Home" tab, and in the Quick Links box, click myCSUNprofile.

Indicate the term and year you are applying for: Fall Semester Spring Semester Year _____
Select your applicant group: Freshman Transfer Applicant

REASON FOR APPEAL: Please select the ONE reason below that best describes your request.

- Request to submit late application for admission
- Request to submit late transcripts, documents, or test scores
- Request to submit late Intent to Register
- Request for re-evaluation of denied admission (*New supporting documentation is required.*)
- Other: _____

OUR RESPONSE PROCESS

The Admissions Appeals Committee will make every effort to respond to your petition within **30 business days** of receiving your appeal. Because many students may not be notified of the results of their appeal until a month before classes begin, we strongly encourage you to pursue the other higher education options available to you.

YOUR CERTIFICATION

My signature certifies that the information I have provided is accurate and complete. I further certify that all documents submitted in support of this application are authentic and unaltered records that pertain to me. I understand that if my appeal is approved, I am still responsible for meeting deadlines and other obligations that pertain to the desired admission term. I also understand that an appeal is only considered once and the decision rendered is final. I acknowledge that, regardless of the reason, I may not submit another appeal for the same academic term.

Student's Signature _____ Date _____

FOR OFFICE USE ONLY

Appeal received by: _____ Date: _____

- Appeal Approved / Conditions (if applicable): _____
- Appeal Denied for the following reason(s): _____

Reviewed by: _____ Decision sent by: _____ Date sent: _____

Admission Appeal Cover Sheet and Instructions

Admission decisions at California State University, Northridge (CSUN) are based on our verification that the applicant's self-reported academic information meets admission eligibility requirements. We may **provisionally** admit applicants until all eligibility requirements and deadlines are met and verified with the appropriate documentation. Read more at www.csun.edu/admissions-records/provisional-admission.

If you wish to appeal your admission status or missed deadline(s), complete this **Admission Appeal Cover Sheet** and submit it in **one packet** with your **letter of appeal** and **supporting documents**. Please note that applicants can file only one admission appeal per academic term. The decisions we render are final and non-negotiable for that term.

This cover sheet and its instructions are available at www.csun.edu/admissions-records/admission-appeals.

STEP 1 Prepare your admission appeal **packet**. Incomplete appeals will not be considered. Your packet must include the completed cover sheet on side 1, your letter of appeal, and supporting documents.

STEP 2 Write your **letter of appeal**, including the following:

- Clearly explain your reasons for the appeal and provide supporting details.
- Describe how you meet the admissions requirements.
- Describe any extenuating circumstances (e.g., military service, family crisis) that prevented you from meeting a deadline.
- Provide your complete student contact information (see Step 3 below).

STEP 3 Your letter must also include complete **student contact information**, including:

- full name
- CSUN 9-digit student ID number (if known)
- mailing address
- phone number for messages
- email address

STEP 4 Enclose **supporting documents** in your appeal packet, for example:

- copies of your transcripts (official preferred), both graded and work-in-progress
- documentation supporting the extenuating circumstance(s) you described in your letter of appeal

Note: Please do **not** submit letters of recommendation or copies of awarded honors.

STEP 5 Please submit your appeal packet within **15 business days** from the date you received notice that your request for admission was denied. Deliver your packet by mail or in person:

*To deliver **by mail**:*

Office of Admissions and Records - CSUN
ATTN: Admissions Appeals Committee
18111 Nordhoff St.
Northridge, CA 91330-8207

*To deliver **in person**:*

Admissions and Records is located in the Student Services Center, Bayramian Hall, first floor lobby (BH 100). Get driving directions and a campus map at www.csun.edu/csun-maps.

Our Response Process

The Admissions Appeals Committee will make every effort to respond to your petition within **30 business days** of receiving your appeal request. Appeal decisions will be communicated to you via your email account. Because many students may not be notified of the results of their appeal until a month before classes begin, we strongly encourage you to pursue the other higher education options available to you. Thank you for your interest in attending CSUN.