NOTE: This form should NOT be used for residency related appeals.

Admission decisions were based on the evaluation of the information from your university admission application and/or academic records. Failure to meet admission criteria, or deadlines, will negatively affect your admission/enrollment eligibility, and may not be appealed.

All requests must include documentation related to the extraordinary circumstances you wish to be considered for the appeal. You must prove that you meet the established admission criteria for your classification (freshman or transfer) and/or that you did not miss any admission and enrollment related deadlines.

Appeals will be considered once, and decisions rendered are final and non-negotiable. Students submitting appeals will be notified via email on their final appeal decisions, and are advised not to change their existing college or educational pursuits while waiting for the appeal decision. Cal State LA applicants should verify that their current e-mail address on Golden Eagle Territory (GET) is accurate, as the university uses e-mail as the official means of communication.

In preparing your appeal, please understand the following:
• Letters of recommendation will not be considered.
• Reporting errors made on the application are not a basis for the reversal of a decision.
• Appeal letters must be written and submitted by applicant.
• Only one appeal per term

For all appeals, please note the following:
1. Appeals submitted via e-mail or fax will not be considered.
2. All appeals must be filed within 15 business days of the notice of admission decision, or after a posted deadline.
3. Appeals will be considered once, and decisions rendered are final and non-negotiable.
4. Appeal packets should include:
   • Cal State LA Admissions Appeal Form
   • Letter of Appeal
   • Documentation to support your appeal (e.g., transcripts, SAT/ACT scores, proof of mailing/submission of requested information, etc.)
5. Incomplete packets will not be considered and will not be returned for completion. They will be denied and cannot be re-submitted.
6. An acknowledgement of receipt of your appeal packet will be emailed to you within 5-7 business days.
7. Submit the appeal packet in person to Student Affairs Building, Room 101, or by mail to:

Office of Admissions and Recruitment
California State University, Los Angeles
RE: Admissions Appeal
5151 State University Drive, SA 101
Los Angeles, CA 90032

Office Hours:
Monday-Thursday: 8:00 a.m. - 6:00 p.m.
Friday: 8:00 a.m. - 5:00 p.m.

If mailing your packet, you may choose to purchase a certificate of mailing from the USPS for your records.
California State University, Los Angeles
Office of Admissions and Recruitment

ADMISSIONS APPEAL FORM

Please print clearly

Applicant Name: ____________________________ CIN: ____________________

Email Address: ____________________________ Phone #: ____________________
(All appeal notifications and decisions will be emailed, please provide a valid email address.)

ENTRY TERM/ YEAR: ________________
All appeals must be filed within 15 business days of the notice of admission decision, or after a posted admission related deadline. This form should NOT be used for residency related appeals.

Appeal Type:

☐ Admission Decision
   (for students that know they meet the requirements for their classification but were determined ineligible.)

☐ Institutional Review
   (for students that submitted their documents on time but the university does not show it being received or received on time. Please check the box(es) that pertain(s) to the document(s) in question.)
   ○ Information Submission
   ○ Test Scores (i.e. SAT, ACT, AP, TOEFL, etc)
   ○ Enrollment Confirmation Deposit
   ○ Transcripts
   ○ Other: __________________________

Submit ALL of the following documents in ONE COMPLETE PACKET.
Incomplete packets will not be considered and the appeal may not be re-submitted.

1) Appeal Form: Complete this entire form.
2) Letter of Appeal: Must address extenuating circumstances and your reason for the appeal.
3) Documentation to support your appeal (e.g., transcripts, test scores, proof of mailing/submission of requested information, etc.)

My signature below acknowledges the following statements:

The information on this form and in any attachments is complete and accurate. It also authorizes the Office of Admissions and Recruitment to verify any information submitted.

I understand that I will receive an appeal acknowledgement email within 5-7 business days after receipt by the Office of Admissions and Recruitment and that I am responsible for adhering to all established Admission document and payment deadlines in order to avoid not being able to enroll for the term for which I am applying.

Student Signature: ____________________________ Today’s Date: ____________________

FOR OFFICE USE ONLY

Appeal received on: ________________ Acknowledgement sent by: ____________________ Date: ________________
☐ Appeal Approved | Conditions (if applicable): __________________________
☐ Appeal Denied - Incomplete
☐ Appeal Denied for the following reason(s): __________________________

Reviewed by: ____________________________ Today’s Date: ________________

Appeal provided by: ________________ Date: ________________
Rev. 09/17