

High School Guest Exception Request

PLEASE PRINT ALL INFORMATION IN BLACK INK



Complete this form if:

- You do not meet the standard high school guest requirements and would like to request an exception
- You wish to take more than six credit hours as a guest student

This form will not be considered complete until a copy of the student's current high school schedule is submitted.

I am requesting an exception to:

- | | |
|---|--|
| <input type="checkbox"/> 3.0 cumulative high school GPA | <input type="checkbox"/> Completion of sophomore year |
| <input type="checkbox"/> 2.0 cumulative WSU GPA | <input type="checkbox"/> Take more than six credit hours |

Student Name: _____ myWSU ID: _____

Address: _____ Date of Birth: _____

City, State, Zip: _____ Phone: _____

High School: _____ Graduation Year: _____

Semester Requesting Exception: Fall _____ Spring _____ Summer _____ 20 _____

Is the student planning to take classes through another college in the same semester? YES NO

If "yes," what classes and from what college?

Briefly present a justification for the requested exception:

Intended classes for student at WSU in semester in which exception is being requested:

I understand that this is only a request for exception. The final decision regarding my guest admission status rests with the Office of Undergraduate Admissions.

Signature: _____ Date: _____

Return Form to: April Cozine, Office of Admissions, Wichita State University, 1845 Fairmount, Wichita, KS 67260- 0124. The form can also be faxed to (316) 978-3174.

FOR OFFICE USE ONLY

HS GPA: _____ ACT: _____ WSU GPA: _____ Date: _____ Initials: _____ Approved / Denied

Notes: