WESTERN MICHIGAN UNIVERSITY Office of the Registrar 1903 W. Michigan Avenue Kalamazoo, MI 49008-5256 (269) 387-4300 www.wmich.edu/registrar

Late Add Fee Appeal

As a student of Western Michigan University, you agree to comply with all approved policies and requirements. An exception to policy may be granted ONLY for a reason of extenuating circumstances.

Students appealing must:

- 1. Complete this form.
- 2. Write a brief summary explaining the circumstances.
- 3. Attach necessary documentation supporting the circumstances and written explanation. *Please do not write on the back of this form.*

Please note: Requests received without supporting documentation will be considered incomplete and will be returned.

Please print clearly

Student Name (Last):	(First):	(M.I.):	WIN:
Address:	City:	State:	Zip Code:
Phone Number (include area code):	Email Address:		
Appeal Term: ☐ Fall ☐ Spring ☐	Summer I		
	esults will be sent to your official rn Michigan University email addre	ess.	
Student Signature:			Date:

Return completed form to: Registrar's Office 1903 W. Michigan Avenue Kalamazoo, MI 49008-5256

	Approved
	Denied
Act	tion:
Da	te:
Co	mments: