



## **Early Enrollment Appeal**

| Student ID:                 | Name:                  | Date o  | of Birth:                 | _Phone:               |
|-----------------------------|------------------------|---|---------------------------|-----------------------|
| Mailing Address:            |                        | City:   | State: _                  | Zip:                  |
| personal statement and      | a letter of support fr | and are not guaranteed app<br>rom a high school administro<br>th the email account used on      | ator, counselor or Concu  | ırrent Enrollment     |
| 1. Please list the semest   | er and year for whicl  | h you are applying  | nester Year               | _                     |
| 2. Please list the qualific | ation you are appeal   | ling:   |                           |                       |
| ACT/Placen                  | nent Score             | Grade Level   | Other                     |                       |
| •                           | ement explaining why   | d to include:<br>y you feel an exception shou<br>chool administrator, counsel                   | _                         | rly Enrollment Policy |
| students will be admitte    | ed as non-degree see   | for EE will pay regular tuitio<br>king and will not be eligible<br>class) graduate from high sc | for financial aid or scho |                       |
|                             |                        | nms, there may be age minim<br>n of Occupational and Profes                                     |                           |                       |
| 6. Please note this appe    | al is for Admissions r | requirements only. It does no   | ot override any course p  | ore-requisites.       |
|                             |                        |   |                           |                       |
| I have truthfully represent | ted all statements con | tained in this appeal to the bes  | st of my knowledge.       |                       |
| Signature:                  |                        | Date  | e:                        |                       |
| FOR OFFICE USE ONLY         |                        |   |                           |                       |
| Approved: Denied:           | Processed by:          | Notes:  |                           |                       |
|                             |                        |   |                           |                       |