

**UNIVERSITY OF WISCONSIN-LA CROSSE**  
**Business Services Office, 125 Graff Main Hall**

**Appeal for Exemption from Excess Credit Charges**

**DIRECTIONS:** Complete this form, attach an unofficial transcript and submit it to your Dean's Office. Your appeal should include a timeline for completion of your remaining degree requirements. *Appeals will be considered until mid-term of the term in which the charges occur.*

Written notification regarding the decision on your appeal will be conveyed to you by the Business Services Office, 608-785-8545.

Name \_\_\_\_\_ ID# \_\_\_\_\_  
Please Print

Major(s) \_\_\_\_\_ College/School \_\_\_\_\_

Local Address \_\_\_\_\_  
Street City State Zip

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Student's Appeal Statement (or attach a typed statement):

Signature \_\_\_\_\_ Date \_\_\_\_\_

Do not write below this line

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\_\_\_\_\_  
Dean of College or School Date  support  not support

Comments:

\_\_\_\_\_  
Controller/Asst. Controller Date  approve  not approve

Comments: