University of Wisconsin-La Crosse College of Science and Health

Appealing Your Ineligible to Return Status

APPEAL LETTER FORMAT

Date

Student Name Street Address City, State Zip Telephone Number Email address @uwlax.edu

Subject: Request for Readmission to UW-La Crosse

Dear Dean's Appeal Committee:

Paragraph 1:

CONTENT of this section: please describe the following:

a. What has contributed to your poor academic performance?

Paragraph 2:

CONTENT of this section: please describe the following:

b. How will you improve your performance this coming semester?

Paragraph 3:

CONTENT of this section: please describe the following:

c. What major/academic program do you intend to pursue?

Closing Paragraph

Respectfully,

Student Name Student ID #