Undergraduate Admission Appeals Form

This form is intended to be used by students who have been recently denied admission into Bemidji State University, and who wish to appeal the decision.

Name: ____________________________________________________________________
First       Middle        Last

Address:___________________________________________________________________

Phone: (_____) _____ - _________  Email: ___________________________________

This form is to be used as a cover letter. Along with this form, please submit the following information:

1. Written response to the following questions:
   a. Why do you feel that Bemidji State University is the right fit for you? What are your academic goals?
   b. As the committee reviews your previous academic work, what would you like them to know? What were the circumstances that, in your opinion, created the academic record they see? What changes, if any, have you made to be academically successful?
   c. Why do you believe that you will be successful in a college setting?
   d. Tell us about yourself, including the organizations and activities that you are involved in and how these benefit you as a person and student.

2. Include two letters of recommendation, if you have not already done so.

3. Include an updated transcript that shows your more recent grades and compute your core G.P.A. (English, Math, Science & Social Studies).

4. If you have plans to retake the ACT Exam, indicate the date you are registered.

After all information is complete submit your supporting documents along with this form to:

Bemidji State University
Director of Admissions
1500 Birchmont Drive
Bemidji, Minnesota 56601