

**Student Request Form**  
**Dunwoody College of Technology**

Student's Name: Last: \_\_\_\_\_ First: \_\_\_\_\_ Middle: \_\_\_\_\_

Program/Curriculum: \_\_\_\_\_ Student ID: \_\_\_\_\_

Street Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Request: \_\_\_\_\_

Appeal: \_\_\_\_\_ Date of original request: \_\_\_\_\_

*Please describe the nature of your request. If you are appealing a prior decision please indicate the date of the original request. Indicate what steps you have taken so far (talked with: instructor, head of department, assistant provost, etc.). Provide concrete information or evidence that we will need to know in order to best process your request. Feel free to attach an additional page if needed.*

Description of request: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

If you would like to schedule a meeting regarding this request please check with the Dean of Students. Requests are addressed on a case-by-case basis.

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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Office Use:

Request: \_\_\_\_\_ denied \_\_\_\_\_ granted

Summary of request granted: \_\_\_\_\_  
\_\_\_\_\_

Office signature: \_\_\_\_\_ Date: \_\_\_\_\_

E-mail Notification to:

- \_\_\_\_\_ Student
- \_\_\_\_\_ Accounting
- \_\_\_\_\_ Dean of Students
- \_\_\_\_\_ Financial Aid
- \_\_\_\_\_ Provost
- \_\_\_\_\_ Dean of A&S
- \_\_\_\_\_ Director of Admissions
- \_\_\_\_\_ Dean or Manager of Program
- \_\_\_\_\_ Other (Specify) \_\_\_\_\_

Reviewed by (sign & date):

- Dean/Manager \_\_\_\_\_
- Finance/Accounting \_\_\_\_\_
- Bursar \_\_\_\_\_
- Other (Specify) \_\_\_\_\_
- Logged for compliance (do not file if not initialed) \_\_\_\_\_
- Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_