

**Clarkson College**  
**Admission Policy – Appendix A – Admissions Request Form**

Clarkson College complies with all applicable federal, state, and local laws relating to discrimination based on race, color, religion, ancestry, sexual orientation, physical or mental disability, national origin, ethnicity, sex, age, veteran's status, or marital status. This Admissions Request Form is the method by which an individual formally seeks answers to questions pertaining to their enrollment. This form must be submitted to the Enrollment and Advising Department, which will convene the appropriate personnel. You will be notified by the Enrollment and Advising Department of the results within 5 business days after the date received.

Name: \_\_\_\_\_

Describe your request and the outcome you would like to see as a result of completing this form. Attach documentation as appropriate.

Enrollment and Advising Representative/Student's Signature: \_\_\_\_\_

Date: \_\_\_\_\_

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Decision:      Approved      Not Approved      Alternative      Need More Information

Comments:

Director of Enrollment & Advising Signature: \_\_\_\_\_

Received by Enrollment & Advising Date: \_\_\_\_\_

Decision Sent to Date: \_\_\_\_\_

- Student
- Program Director
- Registrar
- Other \_\_\_\_\_