BUSINESS OFFICE APPEAL FORM

email form to:
brian.stanley@maconstate.edu

OR

mail form to:
Brian Stanley
Business Office
100 College Station Drive
Macon GA 31206

DATE: _____

NAME: _____ **MSC ID:** **926** [ ] [ ]

ADDRESS: _____

_____

CONTACT PHONE NUMBERS

CELL _____

WORK _____

HOME _____

ACTION REQUESTED: *(please include term, ex. Fall 2008)*

REASON: *(please attach any necessary documentation)*

FOR BUSINESS OFFICE USE ONLY

Date received: _____ Appeal approved? [ ] Yes Student contacted by: _____

By: _____ [ ] No Date: _____

Notes: _____