



Student Concern Form Student Academic Success Center

☐ Logged in database
☐ Decision entered in database

Name: Click or tap here to enter name		Date: Click or tap to enter a date.
Student G#: Click or tap here to enter G-Number	Day Phone: Click or tap here to enter phone	
Local Street Address: Click or tap here to enter address		
City: Click or tap here to enter city	State: Choose an item.	Zip: Enter Zip
Email: Click or tap here to enter text.	Advisor: Click or tap here to enter text.	
Major(s): Click or tap here to enter text.	Minor(s): Click or tap here to enter text.	

Transfer or GVSU Course (subject, number, and title) (Ex: EN 237 - Fiction)	College/University and Term Course Taken (Ex: Grand Rapids Community College, Fall 2012)	Link to Course Description* (required for evaluation or may attach syllabus for review)	Identify General Education Program Category you wish to fulfill (www.gvsu.edu/gened) (If you are requesting a specific GVSU equivalent course, this may require departmental evaluation)
Subject & Number: Click or tap here to enter text. Title: Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.
Subject & Number: Click or tap here to enter text. Title: Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.
Subject & Number: Click or tap here to enter text. Title: Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.

Provide brief description of reason for request(s): Click or tap here to enter text.

*A syllabus is required for evaluating statistics coursework—attach document.

Email this completed form as a **MS Word document** and any attachments to sasconcerns@gvsu.edu for review.
If you have further questions, call the Student Academic Success Center at 616-331-3588.

Official Response: Click or tap here to enter text.

<input type="checkbox"/>	For This Student Only	<input type="checkbox"/>	Auditor notified	Authorizer's Name: Click or tap here to enter text.
<input type="checkbox"/>	For All Students	<input type="checkbox"/>	Student notified	Date: Click or tap to enter a date.