Note: Continuously enrolled students, please do not use this form.

PETITION FOR EXCEPTION TO UNIVERSITY POLICY UNDERGRADUATE ADMISSIONS

Please return to:

Office of Admissions

University of MO-Kansas City

5115 Oak, Room 120

Kansas City, MO 64110-2499

Fax- 816-235-5544 admit@umkc.edu

New Applicant:					
Readmit Applicant:					

Legal Name (Last)	(First)	(Middle Initial)	(SS#)			
ACADEMIC UNIT (A&S, Bus, Conservatory, etc.)		Classification				
Local Address (Street)	(City)	(State)	(Zip)	(Phone)		
Last School Attended (Name)		(Location))		
OBJECTIVE OF PETITION: _						
				<u></u>		
JUSTIFICATION FOR PETITION: (Supporting Logic, Evidence, Statements) Use separate sheet if more space is needed, attach any supporting evidence and/or documentation.						
			 			
Student's			Date			