

Student Information

Name: _____

Date Submitted: _____

Phone Number: _____

KSU ID#: _____

KSU NetID: _____

Deadlines			

Waiver Request Information

1. In which course are you seeking to re-enroll? _____
2. Indicate the semester _____ and year _____ you are seeking re-enrollment.
3. First attempt at course: Semester: Fall Spring Summer Year: _____
Grade: A B C D F W WF
4. Second attempt at course: Semester: Fall Spring Summer Year: _____
Grade: A B C D F W WF
5. Which of the factors impacted your academic performance during the most recent academic semester? (check all that apply):

Academic

- Ineffective study skills
- Inadequate/distracting study environment
- Undeveloped time management skills
- Unable to understand course material
- Possible learning disability
- Insufficient notetaking skills
- Undeveloped writing ability
- Undeveloped mathematical ability
- Missed classes or checked D2L infrequently
- Test-taking anxiety
- Procrastination

Major/Career

- Uncertain of/unhappy with major
- Major of interest not offered at KSU
- No clear career goals or plans
- Not sure why I'm in college
- Unsure of skills or abilities

Situational

- Financial difficulties
- Too much time spent working
- Legal issues
- Commuting distance
- Housing insecurity
- Food insecurity

Family/Social

- Adjustment to KSU
- Loneliness/separation from home, family, or friends
- Roommate issues
- Pressure from parents or partner(s)
- Too much time spent socializing
- Caregiving obligations
- Death of friend or family member

Personal

- Physical illness, health problems, injury
- Use of alcohol/other substances
- Pressure, stress, anxiety, or overwhelmed
- Depression or lack of motivation/focus
- Media overuse (e.g., video games, TV)

Other factors not listed:

6. Rank the top three factors that you believe most impacted your academic performance:

1st:

2nd:

3rd:

7. Thinking back to the factors that impacted your performance, explain what specific behavioral changes you will make, how your situation has changed (if it has), and/or resources you plan to utilize to successfully complete the course if you are granted a waiver.

Provide your initials below to indicate that if this waiver is approved, you:

- Agree to attend every class and/or check D2L daily during the standard work week.
- Agree to complete and submit all assessments/assignments on time.
- Agree to contact your instructor immediately if you are unable to attend class (or check D2L) and/or submit assessments/assignments on time in the case of extenuating circumstances.
- Agree to implement the changes you have specified in the prior section.
- Agree to seek assistance from your instructor(s), the Department of Psychological Science, your academic Advisor(s), and/or other KSU staff when you encounter issues that are impeding academic success.
- Agree to utilize the KSU resources as needed (e.g., Writing Center, Psych Lab, SI Leaders, CPS).
- Agree to meet with your academic advisor at least once a semester.

Policy and Procedures:

Consistent with the [2024-2025 KSU Policy on Re-enrollment](#), complete this form to have the Department Chair (or designee) of Psychological Science review your request. A departmental representative may contact you to schedule a meeting to discuss your request. You should receive a decision within 5-7 business days.

Initial below:

I have read and understand the KSU Re-Enrollment Policy:

I understand that...

- if this application is incomplete, lacks detail, or contains inaccurate information, it will be denied.
- the decision of the Chair (or designee) is final.
- if the waiver is granted, an override into a closed section will not be given.
- if the waiver is granted, psychology course prerequisites will not be waived.
- if the waiver is not granted,
 - you may attempt an equivalent course at another institution (if applicable) and seek to transfer it to KSU (if you earn at least a "C") or
 - if the course is critical to your degree progress and cannot be taken elsewhere, you will need to change your major.

Student Signature: _____ Date: _____

FOR DEPARTMENT OFFICE USE ONLY

Date Received: _____

Received By: _____

Last Modified: 01/07/2026