

**FERRIS STATE UNIVERSITY**  
**Educational Counseling & Disabilities Services (ECDS)**  
**Arts and Sciences Commons 1017**  
**Big Rapids, MI 49307**  
[ecds@ferris.edu](mailto:ecds@ferris.edu)

**Phone (231) 591-3057 Fax (231) 591-3939**

**REQUEST FOR RECONSIDERATION**

Use this form if you want to appeal the accommodations that you will receive through Educational Counseling and Disabilities Services. Please complete this **"Request for Reconsideration"** form. Detach and save the pink copy for your files and submit the completed form with any additional documentation to: Ferris State University, Educational Counseling & Disabilities Services, 901 South State Street, STR-313, Big Rapids, MI 49307. If you would like to meet with a counselor in person, please contact us at 231-591-3057. If your appeal has not been approved by ECDS, you may forward your appeal to Dr. William Potter at the address below.

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

Original Documentation Presented

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

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

Student #: \_\_\_\_\_

Additional Documentation Presented

Telephone: \_\_\_\_\_

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

Address: \_\_\_\_\_

What action do you want to see taken based on the additional information/documentation?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

(For Office Use Only)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

*Ferris State University*  
*Dr. Jason Bentley 820 Campus Drive,*  
*ASC 1016B*  
*Big Rapids, MI 49307*

White: ECDS

Pink: Student