FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

| OMB APPROVAL | | | | | | |
|-------------------------|-----------|--|--|--|--|--|
| MB Number: | 3235-0287 | | | | | |
| stimated average burden | | | | | | |
| ours per response | e 0.5 | | | | | |

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

| (Print or Type Responses) 1. Name and Address of Reporting Person * Forster Amy T | | | | 2. Issuer Name and Ticker or Trading Symbol WESTELL TECHNOLOGIES INC [WSTL] | | | | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner | | | | |
|--|--|--------------------------------------|--|---|---------|---|---|------------------|---|----------------|--|---|--------------------|--|--|------------|
| WESTELL TECHNOLOGIES, INC., 750 NORTH COMMONS DRIVE | | | | 3. Date of Earliest Transaction (Month/Day/Year) 06/17/2013 | | | | | | | X | X Officer (give title below) Other (specify below) Interim CFO, VP&Corp Contoller | | | | |
| (Street) AURORA, IL 60504 | | | 4. If Amendment, Date Original Filed(Month/Day/Year) | | | | | | | _X_ F | 6. Individual or Joint/Group Filing(Check Applicable Line) _X_Form filed by One Reporting PersonForm filed by More than One Reporting Person | | | | | |
| (City) | <u>, </u> | (Zip) | Table I - Non-Derivative Securities Acqu | | | | | | | | lired, Disposed of, or Beneficially Owned | | | | | |
| (Instr. 3) | | 2. Transaction Date (Month/Day/Year) | 2A. Deemed Execution Date, any (Month/Day/Yea | | e, if C | | 4. Securities Acqu (A) or Disposed c (Instr. 3, 4 and 5) | | of (D) Owned Follow | | | | Ownership Form: | 7. Nature of Indirect Beneficial Ownership | | |
| | | | | | | | Code | V | Amoun | (A) or (D) | Price | | | (| or Indirect (I) (Instr. 4) | Instr. 4) |
| Derivative Security (Instr. 3) | 2. 3. Transaction 3A. Deemed | | | (e.g., puts, calls, if Transaction of Code D ear) (Instr. 8) S (A (A (B (B (C (C (C | | 5. Num of Derivat Securit Acquir (A) or Dispos (D) | warrants, of i. Number of Derivative Securities Acquired A) or Disposed of | | Expiration Date (Month/Day/Year) An Un Se | | 7. Title and Amount of Underlying Securities | es) . Title and carmount of Underlying | | 9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s) | Ownership Form of Derivative Security: Direct (D) or Indirect s) (I) | (Instr. 4) |
| | | | | Code | | (Instr. and 5) | (D) | Date Exercisa | | piration te | Title | Amount or Number of Shares | | (Instr. 4) | (Instr. 4) | |
| Employee NQ Stock Options | \$ 2.425 | 06/17/2013 | | A | | 30,000 | | <u>(1)</u> | 06/ | /17/2020 | Class A Common Stock | | \$ 0 | 30,000 | D | |
| Report | ting O | wners | | , | . 1 | | | | | | | | | | | |

Other

Signatures

AURORA, IL 60504

Forster Amy T

| /s/ Amy T. Forster | 06/19/2013 |
|-------------------------------|------------|
| Signature of Reporting Person | Date |

Reporting Owner Name / Address

WESTELL TECHNOLOGIES, INC.

750 NORTH COMMONS DRIVE

Explanation of Responses:

* If the form is filed by more than one reporting person, see Instruction 4(b)(v).

Director

** Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Officer

10% Owner

(1) The Compensation Committee approved an award of non-qualified stock options pursuant to the 2004 Stock Incentive Plan. The options vest 25% annually beginning on June 17, 2014 and for each of the following three years concluding on June 17, 2017.

Interim CFO, VP&Corp Contoller

 $Note: File \ three \ copies \ of \ this \ Form, \ one \ of \ which \ must \ be \ manually \ signed. \ If \ space \ is \ insufficient, \ see \ Instruction \ 6 \ for \ procedure.$

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.