

Withdrawal with Mitigating Circumstances Request

An exception can be considered when there are serious mitigating circumstances such as medical emergencies or other extreme conditions (as determined by the College). The mitigating circumstances must be documented by the student and presented to a counselor, advisor or coach with the request to be withdrawn. Requests for mitigating circumstances must be submitted prior to the close of business on the last day of classes (not including exam week). The Chief Academic Officer or designee will review all requests for withdrawal with mitigating circumstances and will approve or deny each request. If mitigating circumstances are approved, the student will receive a grade of "W." A copy of the documentation will be filed in the Admissions and Records Office and retained according to the records retention policy.

Semester: 🗌 Fall	Spring Summer	Year: 20					
Student ID#: Date of Birth: / / /							
Name:	First	Middle					
Phone:	VCCS Email:						

Class #	Subject	Course #	Course Title	Session (14, 12, 10, 7, 5 week)	Credits
12345	MTH	163	Precalculus I (example)	14	3

Do you intend to remain enrolled or enroll in other classes within this semester? \Box Yes \Box No

Are you receiving financial aid? If yes, you MUST meet with a financial aid officer (in person or via phone/email) regarding any impact on your award and/or eligibility. □ Yes □ No

Financial Aid Officer

Date

**Please complete the back of this form.

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Please provide a typed statement that describes the circumstances, including relevant dates and/or times, which have led to your request for withdrawal. Please make sure to note:
 o How these circumstances have impacted your ability to successfully complete your class

 Why you did not withdraw within the withdrawal period, and Whether you discussed these circumstances with your faculty. If you did, please share the faculty's response? 						
Please attach any additional supporting documentation you would like to have considered.						
Please attach a copy of your advisement transcript.						
**I understand that once I receive acknowledgement of mitigating circumstances from an advisor, the Chief Academic Officer or designee will make the final decision. Student Printed Name:						
Student Signature:		Date:				
Advisor Signature:		Date:				
I approve the following grade assignment:						
Approved Not Approved						
Chief Academic Officer/Des	ignee Signature	Date				
FOR ADMISSIONS AND RECORDS OFFICE USE ONLY						
Processed by:	Date:	Emailed Prof:				
Emailed Student:						