

Admissions & Records

College of the Siskiyous, 800 College Ave., Weed, CA 96094
Phone: (530) 938-5500 - Fax: (530) 938-5367 – Email: registration@siskiyous.edu

Extenuating Circumstance Petition

This petition is to change a letter grade (D, F, RW, or W) to an EW in circumstances where the student was unable to withdraw by the approved withdraw date. This is a formal request for an exception to or waiver of college procedures. Extenuating circumstances are verified cases of illness, accident, or other circumstances beyond your control. State your extenuating circumstances in as much detail and as clearly as possible.

Please print

Last Name: _____ **First Name:** _____ **MI:** _____

Date of Birth: _____ **Student ID#: S00** _____ **or SSN:** _____

COS Email: _____ **Phone:** _____

Mailing Address: _____

City: _____ **State:** _____ **Zip Code:** _____

Students are required to complete both sides of this form with the appropriate signatures from the Instructor of **each class**. Attach evidence to support your request.

Petitions with insufficient information, explanation, and documentation will be denied.

Petition Request for _____ (Semester)

I am requesting a late withdraw from the following courses (after the last day to drop) because:

- Accident
- Illness (Chronic conditions do not qualify under this process)
- Other Circumstance beyond student's control that would make it impossible for the student to drop the course in time.

★Please Note that if none of the above apply, you are not eligible for an appeal

CRN	Course	Units

Student Explanation: (Print or type)

Signature: _____

Date: _____

Instructor(s) Review

(You must have each instructor's input for the class(es) you are appealing. Incomplete forms will be denied.)

Course 1 _____ **Instructor** _____

I support I do not support this student's petition. Instructor Signature: _____

Comments: _____

Course 2 _____ **Instructor** _____

I support I do not support this student's petition. Instructor Signature: _____

Comments: _____

Course 3 _____ **Instructor** _____

I support I do not support this student's petition. Instructor Signature: _____

Comments: _____

Course 4 _____ **Instructor** _____

I support I do not support this student's petition. Instructor Signature: _____

Comments: _____

Committee Review

Date _____

Approved- Comments: _____

Denied- Comments: _____

Signature: _____

(VP, Registrar or Designee)

Date: _____