



College of Arts and Sciences

Request to Withdrawal for Extenuating Circumstances

University policy stipulates that students who withdraw from the university after the eighth week of classes be given failing grades in their classes. You may appeal to have your grades replaced with W's if you qualify for extenuating circumstances. Withdrawals due to extenuating circumstances are still subject to all financial aid and SAP rules and calculations.

Instructions

Submit completed forms with supporting documentation by email to tatums@uncw.edu. All necessary documentation must be received at tatums@uncw.edu prior to being processed.

This form is for College of Arts and Science students only. If you have any campus conduct pending through the Office of the Dean of Students, you may not withdraw. Please consult with the Office of the Dean of Students if you have additional questions or concerns.

Student Information:

Banner ID

Phone

Declared Major

Advisor

Name (Last, First, MI)

UNCW Email

Mailing Address (Street, Apt., City, State)

Academic Year:

Term:

Request is Due to Military Activation:

Please check so that you are withdrawn from courses listed on page 2 effective today

Reason for Extenuating Circumstance:

Please check the extenuating circumstance that applies in your case and provide documentation and/or verification:

- Death of family member or critical illness or injury of family member that requires your presence.

(Documentation: obituary or general letter of verification from attending physician)

- Serious medical condition requiring extensive absence or treatment.

(Documentation: letter of verification by physician or therapist)

- Your job or your spouse's job requires transfer to another geographic location or change in work hours.

(Documentation: letter of verification from the employer)

- Other special circumstances. Explain your circumstances on another document to be turned in with this form.



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Why do you feel you qualify for an Extenuating Circumstance? (You may use additional paper and attach)

What are your future academic plans?

Please attach supporting documentation



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Class Information:

Class number and title

Last Date of Attendance

[Empty text box for class number and title]

[Empty text box for last date of attendance]

Class number and title

Last Date of Attendance

[Empty text box for class number and title]

[Empty text box for last date of attendance]

Class number and title

Last Date of Attendance

[Empty text box for class number and title]

[Empty text box for last date of attendance]

Class number and title

Last Date of Attendance

[Empty text box for class number and title]

[Empty text box for last date of attendance]

Class number and title

Last Date of Attendance

[Empty text box for class number and title]

[Empty text box for last date of attendance]

Class number and title

Last Date of Attendance

[Empty text box for class number and title]

[Empty text box for last date of attendance]

Did you discuss your situation with your instructors? If yes, please describe. If no, please explain why.

Yes No

[Large empty text box for describing the situation]

I understand that failure to supply truthful, adequate information on this application or in any supporting documentation will result in a denial of the request.

Student Signature [Empty text box]

Date [Empty text box]

Associate Dean Signature [Empty text box]

Date [Empty text box]

Approved Denied