

## Post-Deadline Course Withdrawal Request Instructions

A withdrawal from an individual course after the withdrawal deadline will only be considered due to extenuating circumstances, which are defined as unavoidable circumstances outside of the student's control that occurred during the term and severely limit the student's ability to participate and perform in the course. Submitting a request does not guarantee approval. A student should continue to attend and participate in the course while a request is considered. If seeking a withdrawal from all courses in a term, please contact the Office of Student Retention.

**Step 1: Request Form:** Complete all parts of the request form. Requests must be submitted by the last day of classes and will not be considered if the final exam has been taken.

**Step 2: Documentation:** A student requesting a post-deadline course withdrawal due to extenuating circumstances must provide documentation that verifies the extenuating circumstances. Below is a list of types of documentation that may be considered. Other documentation to support the written statements provided with a student's request will be considered. This is not a comprehensive list of possible documentation.

- For medical/mental health circumstances, provide documentation regarding treatment for a physical or mental health condition during the term and an explanation of the impacts of that condition on the course.
- For military deployment, provide orders showing notice of call to duty. Students who enlist in the military are subject to the withdrawal deadline.
- For death of a family member, provide a death certificate or obituary.
- For changes in employment or other unexpected financial difficulty, provide a statement from an employer indicating employment change, financial/bank statements, etc.
- For other major life events: Legal documentation, police reports, insurance reports, etc.

**Step 3: Submit Request Form and Documentation to College:** Submit the completed request form and documentation to the designee of the college offering the course, listed below:

College of Arts & Sciences	Carolyn Wiggins, wiggins@wcu.edu, ST 340
College of Business	Hollye Moss, <a href="mailto:hmoss@wcu.edu">hmoss@wcu.edu</a> , 124C Forsyth Bldg
College of Education & Allied Professions	Lee Nickles, <u>Inickles@wcu.edu</u> , KL 201 L
College of Engineering	Chip Ferguson, <a href="mailto:cferguson@wcu.edu">cferguson@wcu.edu</a> ; Belk 161A
College of Fine & Performing Arts	Jane Hughes, jmhughes@wcu.edu; 392 Belk
College of Health & Human Services	C.Y. Wang, cwang@wcu.edu; 201 HHSB

The College may require a student to meet with a representative of the Dean's Office.

**Step 4: Receive Decision:** The Dean or Associate Dean of the College offering the course will notify the student of the final decision for the request. If approved, the student will receive a grade of Withdrawal (W) for the course. For undergraduate students, an approved withdrawal will not count towards the student's 16-hour course withdrawal limit. If denied, the student will earn a grade in the course.

Visit the Catalog for university withdrawal policies:

## **Post-Deadline Course Withdrawal Request Form**

Name:	Student ID (920#):	
Major:	Advisor:	
Course(s) Requested for Withdrawal:	Instructor:	
Current grade (estimated):	Number of Absences:	
Last date of class attendance:	Start date of extenuating circumstances:	
Explain the circumstances that support your need	d to withdraw from this course:	
Be as detailed as possible, provide relevant dates, and		
Why did you not withdraw from the course before	re the deadline?	
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Why are you seeking a withdrawal from a single	course and not all courses in the term?	
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Describe the documentation included with to Documentation is required to verify the extenua	•		
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Have you been sanctioned for academic mis	sconduct (e.g., plagiarism, cheatir	ng, etc.) in this course? If	
yes, explain.			
By signing below, you are declaring that your have provided is valid.	statements are truthful and that	the documentation you	
Chudout Cianatura		Data	
Student Signature:		Date:	
Dea	n's Office Use Only		
Date received:		Date of Student Meeting:	
Instructor Consult (Y/N):	,	Course DH/PD Consult (Y/N):	
Approval (Y/N):	Date Submitted to Regist		
Approver Signature:		Date:	