



OFFICE OF THE REGISTRAR

5840 26th St. W., Bldg. 1, Rm. 237, Bradenton, FL 34207 • phone 941-752-5060 • fax 941-727-6380

Registrar@SCF.edu

**Request to Appeal the Withdrawal Policy**

**Step 1: Complete this form**

Date:	Student ID#:
Name:	
Phone Number:	
Student Email:	
Academic Program:	

**Guidelines:**

- Requests to appeal the withdrawal policy are to be made within **one calendar year** of when the grade was assigned to the course.
- Such requests will be granted only if a student demonstrates *major verifiable extenuating circumstances*, clearly beyond the student's control.
- If the request is approved the "F" grade will be changed to a "W" grade, with no GPA consequences.

**List course(s) for which you are requesting a "W" grade**

CRN (ex. 12345)	Course Prefix (ex. ENC)	Course Number (ex. 1101)	Section Number (ex. B01)	Course Semester (ex. Fall 2019)	Instructor Name

**Step 2:** Attach a letter that clearly explains the *major extenuating* circumstances that were outside of the student's control and occurred during the semester that was impacted.

**Step 3:** Attach 3rd party documentation that supports this request. This may include a doctor's note or other such 3rd party documentation.

**Step 4:** Submit the form, letter and 3rd party documentation to [SCFCare@SCF.edu](mailto:SCFCare@SCF.edu) from your SCF Student Email account.

**Student Signature**

**Date**

Approved

Denied

Denial explanation:	
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**Committee Signature**

**Date**