



Chabot College Admissions & Records Office
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 Hayward, CA 94545
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www.chabotcollege.edu

Las Positas College Admissions & Records Office
 3000 Campus Hill Drive
 Livermore, CA 94551
 Email: lpc-admissions@laspositascollege.edu
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EXCUSED WITHDRAWAL PETITION

This form is to be used in the event that a student wishes to drop one or more courses on the grounds of an extenuating circumstance that prohibited them from dropping these courses or continuing attendance. Extenuating circumstances are verified cases of accidents, illness, other circumstances beyond the control of the student, and other conditions, defined by the local governing board and published in college regulations. Examples of extenuating circumstances may be found at the bottom of this petition. If the petition is approved, an indication of "EW" shall be applied to all approved courses as a grade. **Supporting documentation must be included with this petition to verify the extenuating circumstance. Petitions without supporting documentation will be denied.** A letter of explanation may be included with this petition but will not be considered as supporting documentation.

Note: An EW symbol may be requested by the student until the last day of instruction for the term.

INSTRUCTIONS:

1. Complete this petition.
2. Attach all relevant supporting documentation (must be in PDF format if submitting via email).
3. Submit to the Admissions & Records Office. You will be notified via your college Zonemail account in approximately 10-14 business days.

STUDENT INFORMATION

Last Name, First Name	Student W Number
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CONDITIONS OF ELIGIBILITY

I petition for an Excused Withdrawal, on the grounds of extenuating circumstances, from the following course(s):
 Term: Summer Fall Winter Spring Year:

CRN	SUBJECT	NUMBER	COURSE TYPE
			<input type="checkbox"/> In-Person <input type="checkbox"/> Online <input type="checkbox"/> Hybrid
			<input type="checkbox"/> In-Person <input type="checkbox"/> Online <input type="checkbox"/> Hybrid
			<input type="checkbox"/> In-Person <input type="checkbox"/> Online <input type="checkbox"/> Hybrid
			<input type="checkbox"/> In-Person <input type="checkbox"/> Online <input type="checkbox"/> Hybrid
			<input type="checkbox"/> In-Person <input type="checkbox"/> Online <input type="checkbox"/> Hybrid

The extenuating circumstance, beyond my control and which prohibits/prohibited my continued attendance in the course(s) listed above, is due to:

- | | | |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------|
| Job transfer outside geographic region
Illness in the family where I am primary caregiver
I am an incarcerated student in CA prison or jail and was released or transferred before the end of term
I am the subject of an immigration action | Death of an immediate family member
Chronic or acute illness
Verifiable accident
Natural disaster that directly affected me
Other: | My absence from the above course(s) began on (indicate exact date):
_____/_____/_____ |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------|

REQUESTED COURSES

By signing below, I certify that the information given on, and included with, this petition is truthful and accurate.

Student Signature	Date
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IMPORTANT NOTICES

Acceptable circumstances include, but are not limited to, the following: Job transfer outside the geographical region; illness in the family where the student is the primary caregiver; incarcerated student in a California State Prison or County Jail is released from custody or involuntarily transferred before the end of the term; the student is the subject of an immigration action; death of an immediate family member; chronic or acute illness; verifiable accidents; or natural disasters directly affecting the student.

OFFICE USE ONLY

<input type="checkbox"/> Approved <input type="checkbox"/> Disapproved	Signature, Admissions & Records Administrator	Date
<input type="checkbox"/> EWRC/L <input type="checkbox"/> EWAC/L <input type="checkbox"/> EWDC/L	Done By	Date Done